

RECEIVED

Body & Assembly Operations

JAN 12 1994echnical & Transportation Services Environmental Services

AIR TOXICS AND RADIATION 7, 1994
U.S. EPA, REGION M

Rochelle Marceillars
Air Toxics and Radiation Branch (5AT-26)
Air and Radiation Division
U. S. EPA, Region V
230 S. Dearborn
Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the removal and encapsulation of asbestos during renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan.

If you have any questions or require further information, please contact me at (313) 322-9016.

F. Vitale

Environmental Control Engineer

copy to:

Asbestos Notification Coordinator

Air Quality Division

Michigan DNR P.O. Box 30028 Lansing, MI 48090

Wayne County Health Department Air Pollution Control Division

Suite 700, 640 Temple Detroit, MI 48201

Michigan Department of Public Health ASBESTOS PROGRAM

If Sent Pursuant to: NESHAP, 40 CFR Part 61, Subpart M MAIL TO: ASBESTOS NOTIFIC, COOR. AND U.S. EPA REG. V DNR, AIR QUALITY DIV. 5AC-26-1 Asb. Coor. P.O. Box 30028 230 S. Dearborn Lansing, MI 48909 Chicago, IL 60604 For Projects in Wayne County Send Notice To: Wayne Co. Health Dept. Air Pollution Control Division Suite 700, 640 Temple, Detroit, MI 48201 If Sent Pursuant to: Sec. 220(1-4) or (8), Public Act 135 of 1986, as amended MAIL TO: MDPH, DOH-Asbestos Program 3423 N. Logan St., P.O. Box 30195 Lansing, MI 48909	DNR/MDPH USE ONLY Xerox to
MDPH Asbestos Project Fee (To obtain 1% Project Fee Multiply total Project Cost by 0.01) Total Project Cost: x 0.01 1% Project Fee:	Plumber Mechanical Builders Lic. # Lic. # Lic. # Electrical Lic. # Ucensing Authority Lic. #
1. ABATEMENT CONTRACTOR Name Ford Motor Company Mailing Address City/State/Zip Dearborn, MI 48121 Contact: Fred Vitale Phone:(313) 322-9016 DEMOLITION CONTRACTOR Name Mailing Address City/State/Zip Contact Phone:(2. NAME OF FACILITY OWNER: Name Ford Motor Company Mailing Address City/State/Zip Dearborn, MI 48121 Contact Fred Vitale Phone:813; 322-9016 4. Approximate Amount Of Asbestos Including: Regulated ACM (RACM) to Indicate Unit of Measure RACM removes	DNR/EPA Renovation (>260 Ln ft or 160 sq ft) 10 working days notice DNR/EPA Emergency Renovation DNR/EPA Demolition - 10 working days notice DNR/EPA Ordered Demolition Date of Notification 1/7/94 Date of Revision (if applicable) Is Asbestos Present? Yes No Type of Notification Original Revised Cancelled 3. FACILITY DESCRIPTION Building Name Powerhouse No. 1 Street Address 3001 Miller Rd. Fir/Rm No. City Dearborn County State MI Zip Code 48121 Age (In yrs) State Location North pre-heater #1 boiler Building Size (sq ft) NA No. of floors NA Present Use (sq ft) Prior Use Prior Use RACM to be RACM to be Nonfriable
Pipes Ln Ft Ln M	
Surface Area Sq. Ft Sq. M 200 Vol. of RACM Off Facility Components Cu Ft Cu M	
ENCAP SITE AND UNTIL PROPER DISPOSAL wet method containment will be used - air monitoring	Start: End: HOD(S) TO BE USED Remove ACM from north LS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT DEMO/RENO/ ds in conjunction with a full negative pressure g will be done in accoredance withOSHA regulations g. IF DEMO ORDERED BY A GOVERNMENT AGENCY, IDENTIFY AGENCY Name: Title:
	Authority:

(continued on reverse side)

MI - INSPECT

NOTICE OF INTENT TO RENOVATE/DEMOLISH (continued)

Name: Ford Transportation Services Address: 3001 Miller Rd City: Dearborn State/Zlp: Michigan 18121 Contact Person: Fred Vaitale Phone: (313) 322-2016	Name:Address:	
Address: 3001 Miller Rd City: Dearborn State/Zip: Michigan 18121 Contact Person: Fred With 1	Address:	
City:Dearborn	City: State/Zip: Contact Person:	
State/Zlp: Michigan 18121 Contact Person: Fred With 1	State/Zlp:	
Contact Person: Fred Vitale Phone: (313) 322-2016	Contact Person: ————————————————————————————————————	
Phone: (313) 322-2016	Phone: ()	
Priorie. (313)	Filotie. ()	
	l .	
The second secon		
For Emergency Renovations	with the state of	
Date and hour of emergency:		
Description of the sudden, unexpected event:	/Bill	
The second secon		
Explanation of how the event caused unsafe conditions or would c	ause equipment damage or an unreasonable financial burder	n:
	· · ·	
Description of procedures to be followed in the event that une material becomes crumbled, pulverized, or reduced to powd will be followed, including bulk sampling, and air monitoring.	er Approved asbestos abatement procedure laboratory analysis, abatement, clean-up	s
		- 0€
Procedure, including analytical method, if appropriate, used to	o detect the presence of asbestos material:	
A recent building asbestos survey identifie	ed this meterial on ashorton containing	
Any questionable material will be resampled	d and analyzed.	
I certify that an individual trained in the provisions of this regidemolition or renovation and evidence that the required training inspection during normal business hours. (Required beginning)	ing has been accomplished by this person will be availab	the le for
(Signature	e of Owner/Operator) Date	
*		
I certify that the above information is correct. Up to \$25,000 these regulations.	per day per violation can be assessed for fallure to comp	ly with
(Signatur	e of Owner/Operator) Date	
DNR/DPH USE ONLY		



Technical and Transportation Services Environmental Services



AIR TOXICS AND RADIATION
BRANCH
U.S. EPA, REGION V
Ford Motor Company
3001 Miller Road, 106 CSB

Dearborn, Michigan 48121

January 24, 1994

Rochelle Marceillars
Air Toxics and Radiation Branch (5AT-26)
Air and Radiation Division
U. S. EPA, Region V
230 S. Dearborn
Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project.

We are providing information related to the removal of asbestos during renovation at the Dearborn Glass Plant located in the Ford Motor Company River Rouge Complex, at 3001 Miller Rd, Dearborn, Michigan.

If you have any questions or require further information, please contact me at (313) 323-0883.

J. D. Preece

copy to:

Asbestos Notification Coordinator

Air Quality Division Michigan DNR P.O. Box 30028 Lansing, MI 48090

Wayne County Health Department Air Pollution Control Division

Suite 700, 640 Temple Detroit, MI 48201



Michigan Department of Public Hoalth
ASBESTOS PROGRAM

If Sent Pursuant to: NESHAP, 40 CFR Pert 61, Subpart M MAIL TO: ASBESTOS NOTIFIC. COOR. AND U.S. EPA DNR, AIR QUALITY DIV. 5AC-26-1 A P.O. Box 30028 230 S. Dea Lansing, MI 48909 Chicago, IL For Projects in Wayne County Send Notice To: Wayne Co. Health Dept. Air Pollution Control Division Suite 700, 640 Temple, Detroit, MI 48201 If Sent Pursuant to: Sec. 220(1-4) or (8), Public Act 135 of 1986, amended MAIL TO: MDPH, DOH-Asbestos Program 3423 N. Logan St., P.O. Box 30195 Lansing, MI 48909	Asb. Coor, arborn L 60604	DNR/MDPH USE ONLY Xerox to Fax to: Postmark Date: Rec'd Date; Cont'r Insp. This Fy Notlfic. Rev'd OK Sond Def Letter: Def. Letter Sent: Resp. Due: Att'd: Entered on Def. Log: Entered on Rec'd Log: FOLLOW UP Date: Rev. Due: Att'd: Notification # Transaction # Comments: Spoke w/
MDPH Asbestos Project Fee Total Project Cost:	x 0.01	Plumber Mechanical Builders Llc. #Llc. #Llc.#Llc.#Llcensing Authority
1. ABATEMENT CONTRACTOR Name Ford Motor Company 3001 Miller Rd, 106 CSB City/State/Zip Dearborn, MI 48121 Contact: J. D. Preece Phone:(313) 323 DEMOLITION CONTRACTOR Name Mailing Address City/State/Zip Contact Phone:() 2. NAME OF FACILITY OWNER: Name Ford Motor Company Mailing Address City/State/Zip Dearborn, MI 48121 Contact J. D. Preece Phone:(313) 323.	-0883	MDPH- Demo, Reno, Encap. (>10 Ln ft or 15 sq ft) 10 day notice DNR/EPA Renovation (>260 Ln ft or 160 sq ft) 10 working days notice DNR/EPA Emergency Renovation DNR/EPA Demolition - 10 working days notice DNR/EPA Ordered Demolition Date of Notification Date of Revision (If applicable) Is Asbestos Present? Yes X No Type of Notification Date of Notification Original Revised Cancelled 3. FACILITY DESCRIPTION Building Name Dearborn Glass Plant: Street Address 3001 Miller Rd. City Dearborn. County Wayme State MI Zip Code 48121 Age (in yrs)70 SIte Location Dearborn - Rouge Complex Building Size (sq ft) N/A No. of floors N/A Present Use 1st F1 Lehr Prior Use 1st F1 Lehr
4. Approximate Amount Of Asbestos Including: Regulated AC Indicate Unit of Measure	M (RACM) to RACM to remov	
Pipes Ln Ft Ln M		
Surface Area XX Sq Ft Sq M	576	
Vol. of RACM Off Facility Components		
7. DESCRIPTION OF WORK PRACTICES AND ENGINEERING ENCAP SITE AND UNTIL PROPER DISPOSAL Wet me containment will be used. Air moni	G CONTROLE thods in toring Mine 9	Start: End: End: HOD(S) TO BE USED ACM will be removed from the Lehr

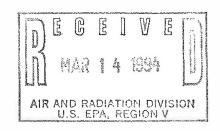
(continued on reverse side)

MI TUSBECT

NOTICE OF INTENT TO RENOVATE/DEMOLISH (continued)

	10. Waste Transporter #2	
Name: Ford Transportation Services Address: 3001 Miller Rd City: Dearborn State/Zlp: Michigan 48121	Name:Address:	
Contact Person: J. D. Preece Phone: (313) 323-0883	Contact Person: ————————————————————————————————————	
For Emergency Renovations		
Date and hour of emergency:	1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
Explanation of how the event caused unsafe conditions or woul	ld cause equipment damage or an unreasonable financial burd	en:
1		
Description of procedures to be followed in the event that unaterial becomes crumbled, pulverized, or reduced to powell be followed, including bulk sampling and air monitoring.	unexpected asbestos is found or previously nonfriable asl wder. Approved asbestos abatement procedur g, laboratory analysis, abatement, clean—	bestos es up
Procedure, including analytical method, if appropriate, used	d to detect the presence of asbestos material:	
A recent building asbestos survey identif Any questionable material will be resampl	ied this material as asbestos containing ed and analyzed.	
l certify that an individual trained in the provisions of this redemolition or renovation and evidence that the required trainspection during normal business hours. (Required begin	aining has been accomplished by this person will be availa	
Joseph	1. Philes. 1/24/94	T. T.
Signat € Signat	ture of Owner/Operator) Date	
I certify that the above information is correct. Up to \$25,00 these regulations.	00 per day per violation can be assessed for failure to com	ply with
South	A / CA 1010 - 1 /011 /011	





Technical & Transportation Services
Power and Utility Operations

March 11, 1994

Rochelle Marceillars
Air Toxics and Radiation Branch (5AT-26)
Air and Radiation Division
U. S. EPA, Region V
230 S. Dearborn
Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the removal and encapsulation of asbestos during renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan.

If you have any questions or require further information, please contact me at (313) 322-9016.

F. Vitale

Environmental Control Engineer

copy to:

Asbestos Notification Coordinator

Air Quality Division

Michigan DNR P.O. Box 30028 Lansing, MI 48090

Wayne County Health Department Air Pollution Control Division

Suite 700, 640 Temple Detroit, MI 48201

Michigan Department of Public Health
ASBESTOS PROGRAM

Suite 700, 640 Temp	C. COOR. AND U.S. EPA DIV. 5AC-26-1 230 S. Der Chicago, I Send Notice To: Ept. Air Pollution Control Division Die, Detroit, MI 48201 1-4) or (8), Public Act 135 of 1986, Des Program	Asb. Coor. arborn L 60604	DNR/MDPH USE ONLY Xerox to Fax to:
MDPH Asbestos Project Fee (To obtain 1% Project Fee Multi total Project Cost by 0.01)	Project Cost:	x 0.01	Plumber Mechanical Builders Lic. # Li
Mailing Address City/State/Zip Dearbo Contact:	Orn, MI 48121 Phone:(313) 32 OR Phone:(1) ER: (otor Company iller Rd, Phone:(1) Phone:(1) Phone:(1) Asbestos Including: Regulated AC	CM (RACM) to	MDPH- Demo, Reno, Encap. (>10 Ln ft or 15 sq ft) 10 day notice DNR/EPA Renovation (>260 Ln ft or 160 sq ft) 10 working days notice DNR/EPA Demolition - 10 working days notice DNR/EPA Demolition - 10 working days notice DNR/EPA Ordered Demolition Date of Notification Date of Revision (if applicable) Is Asbestos Present? Type of Notification Building Name Power 4 Vt. In Opertion Street Address 3001 Miller Rd Fir/Rm No. City Dector State Tip Coda 160 21 Age (In yrs) Site Location Building Size (sq ft) Present Use Power Prior Use Nonfriable To be removed/encap.; Cat. I ACM not removed; and Cat. II ACM not removed At to be RACM to be Encapsulated Asbestos Material Not Removed Category I Category II City Coda 160 21 Category II Age (In yrs) Category II Categor
Pipes	☐ Ln Ft ☐ Ln M		
Surface Area	⊠ Sq Ft Sq M	300	
Vol. of RACMOff Facility Components	Cu Ft Cu M		
7. DESCRIPTION OF WOR ENCAP SITE AND UNTIL	K PRACTICES AND ENGINEERIN L PROPER DISPOSAL Wet 1 I be used, Air mondo	End: (, AND METHOCKER WITH METHOD AS METHOD A	Start: End: THOD(S) TO BE USED Remove A C.M. from dith work With dipt and brown com areas: DLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT DEMO/RENO/ SIN CONJUNCTION WHE A FULL NIGHT OF A PRESENCE DE ADDRE IN A CURRIANCE WITH OUT A PRESENCY 9. IF DEMO ORDERED BY A GOVERNMENT AGENCY, IDENTIFY AGENCY Name:
City/State/Zip:	Allen Park, MI	48101	Authority: Date Ordered to Begin:
	- A Company of the Co		(continued on Tayorsa side)

(continued on reverse side)

MI - INSBECT

NOTICE OF INTENT TO RENOVATE/DEMOLISH (continued)

9. Waste Transporter #1	10. Waste Transporter #2
Name: Ford Transportation Services	Name:
Address: 3001 Miller Rd	Address:
City:Dearborn	Clty:
State/Zlp: Michigan-48121	
Contact Person: F- Vitale	* 1
Phone: (313)	Contact Person:
Phone: (313)	_ Phone: ()
. For Emergency Renovations	
Date and hour of emergency:	at the same of the
Description of the sudden, unexpected event:	
becomplied of the decempedice of this	
360	
Explanation of how the event caused unsafe conditions or wo	ould cause equipment damage or an unreasonable financial burden:
material becomes crumbled, pulverized, or reduced to pull be followed, including bulk sampliand air monitoring.	at unexpected asbestos is found or previously nonfriable asbestos powder. Approved asbestos abatement procedures ng, laboratory analysis, abatement, clean-up
Procedure, including analytical method, if appropriate, us	sed to detect the presence of asbestos material:
A recent building asbestos survey ident	ified this material as asbestos containing.
Any questionable material will be resam	pled and analyzed.
2.8	3 2 2
i. I certify that an individual trained in the provisions of thi demolition or renovation and evidence that the required inspection during normal business hours. (Required before the contraction of the contraction of the certific training in the	Is regulation (40CFR Part 61, Subpart M) will be on-site during the training has been accomplished by this person will be available for ginning November 20, 1991).
(Sign	nature of Owner/Operator) Date
5. I certify that the above information is correct. Up to \$25 these regulations.	5,000 per day per violation can be assessed for failure to comply with
(Sla	nature of Owner/Operator) Date

DNR/DPH USE ONLY





Technical & Transportation Services Power and Utility Operations

August 12, 1994

U.S. EPA, Region 5 AT-18J, Asbesto Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the removal of asbestos during two renovation projects at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan.

If you have any questions or require further information, please contact me at (313) 322-9016.

F. Vitale

Environmental Control Engineer

copy to:

Wayne County Health Dept., APCD

640 Temple, Suite 700 Detroit, MI 48201

MDPH - Asbestos Program

3423 N. Logan/Martin L. King Jr. Blvd.

P.O. Box 30195 Lansing, MI 48909

MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY DIV., NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

P	NR/MDPH USE ONLY ostmark Date: Ok Send Def Lti OLLOW UP: comments:			Name: Force Mailing Addre City/State/Zip Contact: F	Motor Co Por 255: 3001 Miller I Dearborn, MI	ntemal Proj. No. wer & Utility Ops. Rd. 48121 hone: (313) 322-9016
Calculation (Con Asb	Total Project Cost) tractor License Numbers: estos Abatement: Electrical: Mechanical: ensing Authority:	0.01 =(1% Project Fee) Building: Plumbing:		Mailing Addre City/State/Zip Contact: 5. FACILITY ON Name: FORC Mailing Addre City/State/Zip	MNER d Motor Co Poress: 3001 Miller co. Dearborn, MI	nternal Proj. No. wer & Utility Ops. Rd.
	ate of Notification: ate of Revision(s): otification Type: Original lease check all that apply: DPH Demo, Reno, Encap. (>10 L Emergency Renovation/Enc ESHAP (DNR/U.S.EPA) Planned Renovation 10 wc Benergency Renovation Scheduled Demolition above	Revised Candelled AUI n. ft/15 Sq. ft) 10-day notice capsulation U.S. Ef	Annual G 1 9 19 S AND BRANCH PA, REG	Nearest Maj City: Dear Size: (sq. ft. Age: Specific Loc	e (or Number): Proper of dress: 300) Thicker. or Crossroad: Miller or County County	& Dix ty: Wayne State: MI rs: Floor No.: 7 Prior Use:
2. P	* Renovation: Start Da End Da + Asb. Removal: Start Da End Da + Demolition: Start Da End Da End Da Encapsulation: Start Da End Da	te: te: 1 2 3 4 4 te: 1 2 3 4 4 te: te: te: te: te: te: tainment, etc., but <u>not</u> removing	asbestos	Location According City/State/Z -8. WASTETRA Name: For Address: 3 City/State/Z	ANSPORTER1 d'Trans. Serv. 001 Miller Rd. ip: Dbn., MI 48121 3) 322-9016	1I 48101
Work Schedule: Please indicate the anticipated days of the week and work hours for the purpose of scheduling a compliance inspection. Days of the Week Work Hours Asb. Removal: Demolition: Encapsulation: + Check here if this is a multi-phased project. Be sure to attach a schedule showing the start and end dates of each phase and indicate if it is for asbestos removal, demolition, etc.			otion.	DNR or WCAPCD at the addresses listed on the reverse side, for NESHAP definition of "Ordered Demolition." A copy of the ormust accompany this notification.) Include the following information of the property of the ormust accompany this notification.) Gov't Agency Ordering Demo: Name/Title of Person Signing Order.		
1	Also include in the right hand t	Yes No Sestos: Include Regulated Asbe	f non-friable	Cat. I and/or Ca	at. II ACM that will not be	turbed, and/or encapsulated, et removed prior to demolition.
	RACM to be Removed	RACM to be Encapsulated		le ACM not re	moved before Demo. Category II	Unit of Measure Ln. Ft. Ln. M. Sq. Ft. Sq. M.

^{*} Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

NOTIFICATION OF INTENT TO RENOVATE OR DEMOLISH (continued)

	TO THE STATE OF TH	all and the second seco	4
11.	PROJECT DESCRIPTION		
	a)Renovation: Indicate the surface	es RACM will be removed from.	Encapsulation (for MDPH): Indicate surfaces to be encapsulated:
121	Piping Fittings	Boiler(s) Tank(s)	Piping Fittings Boiler(s) Tank(s)
88	Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)	Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s)
*:	Other: (describe)		Other: (describe)
- 5	Ctrici. (describe)		_ Guiet. (describe)
-	—		
	h)Method of removal: Describe h	now the ashestos will be removed	d from the surface (example: glove bag, scrape with hand tools, cut in
		· · · · · · · · · · · · · · · · · · ·	the state of the s
	sections and carefully lower, etc	" conored and place	entin bage or gots var and then into
	backs.	V	J ,
10			Mage: 1 and
			moderate program on the man man man and the contract management of the contract of the contrac
-	c)Demolition: Describe method of	demolition and indicate if complet	ete or partial demolition (If partial, describe which part will be demolished.)
T R	THE RESERVE OF THE	a steel g	
•			
		· · · · · · · · · · · · · · · · · · ·	
12.	ENGINEERING CONTROLS: Des	cribe work practices and engineer	ring controls used to prevent visible emissions before, during, and after
	removal and until proper disposal:	Wet methods in conjur	unction with a full negative pressure
4	containment will be u	used. Air monitoring v	will be done in accordance with OSHA
	regulations.		
13	INTERPRETED ASSESTOS: Desc	ribe procedures that will be follow	wed in the event that unexpected RACM is found or previously non-friable
10.			er, etc.) and therfore regulated: Approved asbestos
			cluding bulk sampling, laboratory analysis,
	abatement, clean-up a	and air monitoring.	
_			
14.	PROCEDURE(S) USED TO DETEC	T THE PRESENCE OF ASBESTO	OS: Indicate how you determined whether or not asbestos is in the facility. If
			uilding survey identified this material as
			terial will be resampled and analyzed.
	aspestos-containing.	Any questionable mate	certar will be resampled and analyzed.
The state of			
15.	EMERGENCY RENOVATIONS: Da		
8	Description of the sudden, unexpe-	cted event:	
		A	W The state of the
	Explain how the event caused uns	safe conditions, would cause equir	ipment damage and/or an unreasonable financial burden:
		8 9	, ,
	4		
16	I certify that an individual trained in	the provisions of 40 CER Part 61	I, Subpart M, will be on-site during the renovation and during demolition
			Evidence that the required training has been completed by this person will be
	available for inspection during norr		* G N
90		. 1	
	h 111+	' shiday	a little 8/18/gv
	- Mind Milliano	315191	<u> </u>
	Signature of Owner or Abatement	Contractor Date	Signature of Owner or Demolition Contractor
<u> </u>			
17.	Signature Requirements for Pri	ojects with Negative Pressure	e Enclosures: (required by Michigan Dept. of Public Health)
1	• • • •	• •	for any asbestos abatement project involving 10 linear feet/15 square feet or more of friable material
l	which is performed within a negative ressure	enclosure. I (the building owner or lessee) ha	nave been advised by the contractor of my responsibility under Act 135 to have clearance air monitoring
i		37	
l	The state of the s		
1	Signature of Building Owner or Lessee	E(Signature of Asbestos Abatement Contractor Representative
1	NOTE: For affected projects, this section on	the notification form must be signed when the	he project notification form is submitted to MOPH,
BRA	All ING ADDRESSES OF	ideliane on bessets as a 1-1-4-4-7-6	farm contest the appropriate MONIOAN appropriate National
			form, contact the appropriate MICHIGAN agencies below.)
		Asbestos Coord. DNR, AQD	NESHAP Projects in Wayne Co.: U.S. EPA, Region 5
1	0 CFR, Part 61,	Town Center, Ste. B, #200 O	OR Wayne Co. Health Dept., APCD AND AT-18J, Asbestos Coord.
S	Subpart M	333 S. Capitol	640 Temple, Suite 700 77 W. Jackson Blvd.
	5	Lansing, MI 48933	Detroit, MI 48201 Chicago, IL 60604
1		12	-
5	Sec. 220(1-4) or (8), Mail to:	MDPH, DOH-ASBESTOS PROGRA	RAM.
P	ublic Act 135 of	3423 N. Logan/Martin L. King Jr.	•/
1	986, as amended	P.O. Box 30195	
	2		517) 335-9482

PR 5661 (rev. 12/93)

MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY DIV., NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1985, as amended, Section 220(1-4) or (8)

	Postmark Date: Ok Send Def Ltr FOLLOW UP: Comments:	Date Def Ltr. Sent:		Mailing Addre	TCONTRACTOR d Motor Co P ess: 3001 Miller Dearborn, MI Vitale Rm 410	ower 8 Rd. 4812	1
	Notific. No.:	Trans. No.:		4. DEMOLITIO		Internal	Proj. No.
10.5	ulate MDPH Asbestos Project x (Total Project Cost)	Fee:		Mailing Addr City/State/Zip Contact:	ess:		
A Li	ontractor License Numbers: sbestos Abatement: Electrical: Mechanical: censing Authority:	Building: Plumbing: AUG 1	1994 (1994 (D. RAL)	Mailing Addr City/State/Zi ATIOOntact: _F	d Motor Co Fress: 3001 Miller p: Dearborn, MI . Vitale	ower Rd. 4812	1
	Date of Notification: 8/15 Date of Revision(s): Notification Type: Original Please check all that apply:	U.S. EPA, F	REGION	Facility Nam	ESCRIPTION See (or Number): Power() Idress: 3001 [7],)]e.	nove Log	Bóiler#3
	MDPH Demo, Reno, Encap. (>10 L Emergency Renovation/Enc NESHAP (DNR/U.S.EPA) Planned Renovation 10 wo Emergency Renovation Scheduled Demolition abov Scheduled Demolition belov Ordered Demolition	apsulation r <u>king</u> days notice e cutoff- 10 <u>working</u> days notice		City: <u>Dear</u> Size: (sq. ft Age: <u>70</u>	No. of Florent Use: (80) - cation(s) Within Facility:	unty: Wa pors: _*	State: MI Floor No.: 3
	PROJECT SCHEDULE * Renovation: Start Da	te: e:	a.	Location Ac	ord Allen Park (oddress: 17005 Oak)	wood B	Blvd.
4	+ Asb. Removal: Start Da	te: 12 94 e: 106 94		City // Gate/Z	Dearborn,	MI 48	3101
18	Encapsulation: Start Date: End Date: End Date:			Name: Ford Trans. Serv. Address: 3001 Miller Rd. City/State/Zip: Dbn., MI 48121 Phone: (313) 322-9016 ()			
* Includes setup, building containment, etc., but not removing asbestos Work Schedule: Please indicate the anticipated days of the week and work hours for the purpose of scheduling a compliance inspection. Days of the Week Asb. Removal: Demolition:			9. ORDERED	DEMOLITIONS: (See g APCD at the addresses P definition of "Ordered npany this notification.)	listed on Demolitic Include t	on." A copy of the order the following information:	
Encapsulation: + Check here if this is a multi-phased project. Be sure to attach a schedule showing the start and end dates of each phase and			Name/Title of Person Signing Order:		. 20		
10.	IS ASBESTOS PRESENT?	Yes No		7 7	. 4	·	
	Also include in the right hand t	estos: Include Regulated Asbe wo columns below the amount o	f non-frial	ole Cat. I and/or Ca	at. II ACM that will not	be remov	
	RACM to be Removed	RACM to be Encapsulated		able ACM not re Category I	moved before Demo Category II		Unit of Measure
6	350] Ln. Ft.
1							Cu. Ft * Cu. M.*

^{*} Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

NOTIFICATION OF INTENT TO RENOVATE OR DEMOLISH (continued)

11.	PROJECT DESCRIPTION	and the second of		
	a)Renovation: Indicate the surface	es RACM will be removed from	Encapsulation (for MDPH): In	ndicate surfaces to be encapsulated:
		Boiler(s) Tank(s)	Piping Fittings	Boiler(s) Tank(s)
23	Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)	Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)
	Other: (describe)		Other: (describe)	
				2 7/12 2
œ -	5 V		uli , e u u u u u u u u u u u u u u u u u u 	
	h)Mathad of ramoval: Describe	how the asbestos will be removed fro	om the curface (example: glove bag	cerano with hand tools cut in
80%	sections and carefully lower, et	c): cut in sections a	ad casefully lawreed	1000 000 6000
	placed in Vai-loads	erand Placed in bay	2	3 ,
	DIGCON WI VOIC TONIE	T WINE THE THE	20 (10 20)	
			rendered to the control of the contr	7
	c)Demolition: Describe method of	f demolition and indicate if complete of	or partial demolition (it partial, desci	ribe which part will be demolished.)
148		*		
ü				•
12.		scribe work practices and engineering		
	removal and until proper disposal:	Wet methods in conjunc	tion with a full negat	ive pressure
	containment will be	used. Air monitoring wi	11 be done in accordan	ce with OSHA
į.	regulations.			
	regulacions.		- Anna	
	1	1		
13.	UNEXPECTED ASBESTOS: Des	cribe procedures that will be followed	in the event that unexpected RACM	is found or previously non-friable
	asbestos becomes friable (crumb)	ed, pulverized, reduced to powder, e	tc.) and therfore regulated: Appro	ved asbestos
	All and a second a	will be followed inclu	•	
	abatement, clean-up		drig zarii bampring, ra	boracory anarysis;
	abacement, Clean-up a	and all monicoling.	A sile transmission and the sile of the si	
-		100 Table 100 Ta		
14.	PROCEDURE(S) USED TO DETEC	CT THE PRESENCE OF ASBESTOS:	Indicate how you determined wheth	er or not asbestos is in the facility. If
	1.0	cribe method: A recent buil		
	aspestos-containing.	Any questionable mater	ial will be resampled	and analyzed.
_				
15	EMERGENCY RENOVATIONS: D	ate and hour of the emergency:		
''		(1 - 1 - 0)		
l	Description of the sudden, unexpe	cted event:		
]				
1		* 0		
ļ	Explain how the event caused un	safe conditions, would cause equipm	ent damage and/or an unreasonable	financial burden:
	2 200 2 4		- E	
-	1 12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	"		
16.		the provisions of 40 CFR Part 61, Su		
			dence that the required training has	been completed by this person will be
1	available for inspection during nor	mai business nours.	* · ·	. 1
	1 () 1 \ 0 \ 0	1.	1124	121.0
{	a el Untak	8/iclay		915194
ł	8:	0113 11	Sing A page of Course on Demolitics of	Contractor Hotel
	Signature of Owner or Abatement	Contractor Date	Signature of Owner or Demolition	Contractor Date
-				
17.	Signature Requirements for Pi	rojects with Negative Pressure E	nclosures: (required by Michiga	an Dept. of Public Health)
		nended, clearance air monitoring is required for a		
l		enclosure. I (the building owner or lessee) have I	een advised by the contractor of my responsibili	ty under Act 135 to have clearance air monitoring
١	performed on this project.	1 100		
1	het villy	115 17	- 8	entering the second of the sec
1	Signature of Building Owner or Lessee		Signature of Asbestos Abatement Contractor	Representative
1				
-	NUIE: For anected projects, this section on	the notification form must be signed when the pr	oject notification form is submitted to MDPH.	
M.	AILING ADDRESSES: (For gi	uidelines on how to complete this form	n, contact the appropriate MICHIGA	N agencies below.)
	•	· Asbestos Coord. DNR, AQD	NESHAP Projects in Wayne Co.	· · · · · ·
-	0 CFR, Part 61,	Town Center, Ste. B, #200 OR	Wayne Co. Health Dept., APCD	AND AT-18J, Asbestos Coord.
5	Subpart M	333 S. Capitol	640 Temple, Suite 700	77 W. Jackson Blvd.
1	·	1 1 141 10000	Detroit, MI 48201	
1		Lansing, Ml 48933	Delion, Mi 70201	Chicago, IL 60604
		Lansing, MI 48933	Denoit, 1411 -10201	Chicago, IL 60604
	Sec. 220(1-4) or (8), Mail to:			Chicago, IL 60604
	, , , , , , , , , , , , , , , , , , , ,	MDPH, DOH-ASBESTOS PROGRAM	L _a v g	Chicago, IL 60604
F	Public Act 135 of	MDPH, DOH-ASBESTOS PROGRAM 3423 N. Logan/Martin L. King Jr. Blv	L _a v g	Chicago, IL 60604
F	100	MDPH, DOH-ASBESTOS PROGRAM 3423 N. Logan/Martin L. King Jr. Blv P.O. Box 30195	L _a v g	Chicago, IL 60604

PR 5661 (rev. 12/93)



Technical & Transportation Services Power and Utility Operations

April 25, 1994

Rochelle Marceillars
Air Toxics and Radiation Branch (5AT-26)
Air and Radiation Division
U. S. EPA, Region V
230 S. Dearborn
Chicago, Illinois 60604

Subject: Notification of Emergency Removal of Asbestos During a Renovation Project

We are providing information related to the removal and encapsulation of asbestos during an emergency renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan. Wayne County Air Pollution Control was notified by telephone at 2:15 p.m. on Friday April 22, before the emergency renovation occurred.

If you have any questions or require further information, please contact me at (313) 322-9016.

Environmental Control Engineer

copy to: Asbestos Notification Coordinator

Air Quality Division

Michigan DNR P.O. Box 30028 Lansing, MI 48090

Wayne County Health Department Air Pollution Control Division

Suite 700, 640 Temple Detroit, MI 48201

MICHIDAN DEPARTMENT OF NATURAL RESOURCES AIR QUALITY DIVISION OF INTENT TO RENOVATE/DEMOLISH

Michigan Department of Public Health **ASBESTOS PROGRAM**

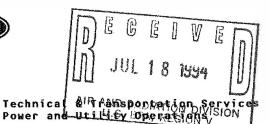
If Sent Pursuant to: NESHAP, 40 CFR Part 61, Subpert M MAIL TO: ASBESTOS NOTIFIC, COOR. AND U.S. EPA REG. V DNR, AIR QUALITY DIV. 5AC-26-1 Asb. Coor. P.O. Box 30028 230 S. Dearborn Lansing, MI 48909 Chicago, IL 60604 For Projects in Wayne County Send Notice To: Wayne Co. Health Dept. Air Pollution Control Division Suite 700, 640 Temple, Detroit, MI 48201 If Sent Pursuant to: Sec. 220(1-4) or (8), Public Act 135 of 1986, as amended MAIL TO: MDPH, DOH-Asbestos Program 3423 N. Logan St., P.O. Box 30195 Lansing, MI 48909 MDPH Asbestos Project Fee (To obtain 1% Project Fee Multiply x 0.01 1% Project Cost by 0.01)	DNR/MDPH USE ONLY Xerox to Fax to: Postmark Date: Rec'd Date: Cont'r Insp. This Fy Notific. Rev'd OK Sond Def Letter: Def. Letter Sent: Resp. Due: Att'd: Entered on Def. Log: Entered on Rec'd Log: FOLLOW UP Date: Rev. Due: Att'd: Notification # Transaction # Comments: Spoke w/ Licensed Asbestos Abatement Contractors # Plumber Mechanical Builders Lic. # Lic. # Lic. # Electrical Lic. # Licensing Authority
1. ABATEMENT CONTRACTOR Name Ford Motor Company 3001 Miller Rd. 106 GSB City/State/Zip Dearborn, MI 48121 Contact: Phone:(313) DEMOLITION CONTRACTOR Name Mailing Address City/State/Zip Contact Phone:(2. NAME OF FACILITY OWNER: Name Ford Motor Company Mailing Address City/State/Zip Dearborn, MI 48121 City/State/Zip Dearborn, MI 48121 Contact: Facility Dearborn, MI 48121 Contact: Facility Dearborn, MI 48121	PLEASE CHECX ALL THAT APPLY MDPH- Demo, Reno, Encap. (>10 Ln ft or 15 sq ft) 10 day notice DNR/EPA Renovation (>260 Ln ft or 160 sq ft) 10 working days notice DNR/EPA Emergency Renovation DNR/EPA Demolition - 10 working days notice DNR/EPA Ordered Demolition Date of Notification Date of Revision (if applicable) Is Asbestos Present? Type of Notification Building Name POWC LOVE No. City Deachor Street Address Tip Code 48121 Age (In yrs) Site Location Building Size (sq ft) No. of floors NA Present Use Prior Use Prior Use Prior Use Prior Use Prior Use Age (In yrs) Prior Use Prior U
Pipes	Encapsulated Asbestos Material Not Removed Category I Category II Demoiltion Start: End:

(continued on reverse side)

NOTICE OF INTENT TO RENOVATE/DEMOLISH (continued)

9. Waste Transporter #1	10. Waste Transporter #2
Name. Ford Transportation Services	Name:
Address: 3001 Miller Rd	Address:
City: Dearborn	City:
State/Zlp: Michigan 48121	State/Zip:
Contact Person:	Contact Person:
Phone: (313)	Phone: ()
I. For Emergency Renovations	
Date and hour of emergency: 4) 22 200 pm	
Description of the sudden unexpected event: Rover	had been down for renovation. Upon
camplation of the renovation a trak w	
domant tube.	used removed at the asbestos envering the
- Anna de 1000.	
Explanation of how the event caused unsale conditions or woul	d cause equipment damage or an unreasonable financial burden:
	not timber would after significantly the
scheduled downtime of boilers & my	
moderation unique for employers or	
2. Description of procedures to be followed in the event that to material, becomes crimbled, pulverland, or reduced to not	unexpected abbestos is found or previously nonfriable asbestos
will be followed, including bulk sampling	wder Approved asbestos abatement procedures
and the second s	
3. Procedure, including analytical method, if appropriate, used	d to detect the presence of asbestos material:
A recent building asbestos survey identif	ied this material as asbestos containing
Any questionable material will be resampl	ed and analyzed.
	egulation (40CFR Part 61, Subpart M) will be on-site during the lining has been accomplished by this person will be available for
Inspectionduring normal business hours. (Reguled begin	
	(these uses
(Signat	ture of Owner/Operator) Date
· · · · · · · · · · · · · · · · · · ·	
	00 per day per violation an be assessed for fallure to comply with
these regulations.	1 U-1754 4 194
(Signation	ture of Owner/Operator) Date
DNR/DPH USE ONLY	





July 13, 1994

U.S. EPA, Region 5 AT-18J, Asbesto Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the removal of asbestos during renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan.

If you have any questions or require further information, please contact me at (313) 322-9016.

F. Vitale

Environmental Control Engineer

copy to:

Wayne County Health Dept., APCD

640 Temple, Suite 700 Detroit, MI 48201

MI DEPT, OF NATURAL RESOURCES (MDNR), AIR QUALITY DIV., NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

-	A THE RESIDENCE OF THE PARTY OF					
- I	ONR/MDPHUSEONLY	* Coold Do				nternal Proj. No. \$53
		Rec'd Date:				ver & Utility Ops.
				Mailing Addr	ess: 3001 Miller F	KQ.
- 1	FOLLOW UP://_ Comments:	Spoke w/:			Dearborn, MI 4	ione: (313) 322-9016
	Comments.					one: (213) 322-3010
				4. DEMOLITIO	227	itemal Proj. No.
	Notific. No.:	Trans. No.:		Name:		
Calcu	late MDPH Asbestos Project	Fee: -	and the second		ress:	
20	***				p:	
_	(Total Project Cost)	0.01 =(1% Project Fee	,	Contact:	P	none: ()
	ontractor License Numbers:		" · .	5. FACILITY O	WNER	itemal Proj. No.
	bestos Abatement:					wer & Utility Ops.
	Electrical:	Plumbing:			ress: 3001 Miller I	
* 1	Mechanical:			City/State/7	p: Dearborn, MI	48121
Lic	censing Authority:			Contact: F	. Vitale P	none: (313) 322-9016
1.	NOTIFICATION	2 - 6 1/				* *************************************
	Date of Notification:	2 -4 4		6. FACILITY D		
	Notification Type: 🔯 Original	Revised Cancelled [Annual	Facility Nam	ne (or Number): <u>Powerho</u>	ouse - loke Ovens
	Please check all that apply:	41 20		Location Ad	ddress: 3001 M ₁ $11e$	o Kd. Tunnel
	MDPH			\		
	Demo, Reno, Encap. (>10 L				jor Crossroad: Miller	
	Emergency Renovation/Enc	apsulation				y: Wayne State: MI
	NESHAP (DNR/U.S.EPA) Planned Renovation 10 wo	rking days notice				s: NA Floor No.: NA
14	Emergency Renovation	ikaig days notice				Prior Use: Tunnel
I	Scheduled Demolition abov					x tunnel between
	Scheduled Demolition below	v cutoff - 10 <u>working</u> days not	ice	XX KIA	14 & Power hove to	om 2 service lines
	Ordered Demolition					
2.	PROJECT SCHEDULE		30	7. DISPOSAL	SITE ord Allen Park Cl	ay Mine Landfill
	* Renovation: Start Da		- 9a V 5.	Name: 10	44 17005 Oakwo	od: Blvd
	+ Asb. Removal: Start Da	6. 7.17.9V		Location Address: 17005 Oakwood Blvd. City/State/Zip: Dearborn, MI 48101		
	End Dat			City/State/2	.p	10101 5 M
	+ Demolition Start Da		1 -5 -7	-8WASTETR	ANSPORTER1	
	End Dal	e:	× -d-	Name: For	d Trans Serv	
1	Encapsulation: Start Da				3001 Miller Rd.	
	End Dat				Zip: <u>Dbn.</u> , MI 48121	
	* Includes setup, building conf	ainment, etc., but not removing	g asbestos	Phone: (31	13) 322-9016	_()
1	Work Schedule: Please indic	ate the anticipated days of the	e week and	0 OBDERED	DEMOLITIONS: (San auto	lelines, obtainable by contacting
5.	work hours for the purpose of			DNR or WC	CAPCD at the addresses lis	ited on the reverse side,
(9)	Days of Asb. Removal:	the Week Work H	ours	for NESHA	P definition of "Ordered De	emolition." A copy of the order
	Asb. Removal:	<u>r </u>	<u>2pm_</u>	Thust action	mpany una nouncation.) in	clude the following information:
	· · · · · · · · · · · · · · · · · · ·	7. P. S.		Gov't Ager	ncy Ordering Demo:	pergrame a n
i	Encapsulation:					
	+ Check here if this is a mu	ilti-phased project. Be sure to art and end dates of <u>each</u> pha	attach a			
	indicate if it is for asbesto	os removal, demolition, etc.		Date of Or	der: Date	Ordered to Begin:
10.	IS ASBESTOS PRESENT?	Yes No 🗌				
	Estimate the amount of asbe Also include in the right hand to	estos: Include Regulated Ast wo columns below the amount	estos Conta of non-friab	aining Material (Role Cat. I and/or C	ACM) to be removed, distract. If ACM that will not be	urbed, and/or encapsulated, etc. removed prior to demolition.
	RACM to be Removed	RACM to be Encapsulated		ble ACM not re Category I	emoved before Demo. Category II	Unit of Measure
	600	6 P		1,1111.0 A		☑ Ln. Ft. ☐ Ln. M.
	160			*** **********************************		Sq. Ft. Sq. M.
	1		1		1	15

^{*} Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

NOTIFICATION OF INTENT TO RENOVATE OR DEMOLISH (continued)

-	
11.	PROJECT DESCRIPTION
	a)Renovation: Indicate the surfaces RACM will be removed from. Encapsulation (for MDPH): Indicate surfaces to be encapsulated:
	Piping Fittings Boiler(s) Tank(s) Piping Fittings Boiler(s) Tank(s)
2	Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s) Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s)
ē. :	
18	Other: (describe) Other: (describe)
(i)	,
-	b)Method of removal: Describe how the asbestos will be removed from the surface (example: glove bag, scrape with hand tools, cut in
1 K	of an allowants to the second of the second
100	COID SELDONS and leveling lower mb Degs lemonation
	floor and placed in bags.
M	The state of the s
9 *	c)Demolition: Describe method of demolition and indicate if complete or partial demolition (If partial, describe which part will be demolished.)
30	
(بنية)	
40	PHOINTEDING CONTROLO. O. T
12.	ENGINEERING CONTROLS: Describe work practices and engineering controls used to prevent visible emissions before, during, and after
	removal and until proper disposal: Wet methods in conjunction with a full negative pressure
	containment will be used. Air monitoring will be done in accordance with OSHA
	regulations. (a) 3 contrarges will be cooled. There Fam and vac lowder will be used
13.	UNEXPECTED ASBESTOS: Describe procedures that will be followed in the event that unexpected RACM is found or previously non-friable
*	asbestos becomes friable (crumbled, pulverized, reduced to powder, etc.) and therfore regulated: Approved_asbestos
l	abatement procedures will be followed including bulk sampling, laboratory analysis,
	abatement, clean-up and air monitoring.
14	PROCEDURE(S) USED TO DETECT THE PRESENCE OF ASBESTOS: Indicate how you determined whether or not asbestos is in the facility. If
17.	
1	analytical sampling was used, describe method: A recent building survey identified this material as
	asbestos-containing. Any questionable material will be resampled and analyzed.
	The second secon
15.	EMERGENCY RENOVATIONS: Date and hour of the emergency:
	Description of the sudden, unexpected event:
1	Explain how the event caused unsafe conditions, would cause equipment damage and/or an unreasonable financial burden:
1	
16.	I certify that an individual trained in the provisions of 40 CFR Part 61, Subpart M, will be on-site during the renovation and during demolition
1	involving RACM above the cutoff and/or during ordered demolition. Evidence that the required training has been completed by this person will be
l	available for inspection during normal business hours.
l	7/13/gy h. 1/18/gx
1	Signature of Owner or Abatement Contractor Date Signature of Owner or Demolition Contractor Date
	Signature of Chile of Abatement Contractor Bate Signature of Chile of Demontion Contractor
17.	Signature Requirements for Projects with Negative Pressure Enclosures: (required by Michigan Dept. of Public Health) Persection 221 (1)(2) of P.A. 135 of 1986, as amended, clearance airmonitoring is required for any asbestos abatement project involving 10 linear feet/15 square feet or more of friable material.
1	which is performed within a negative pressure enclosure. I (the building owner or lessee) have been advised by the contractor of my responsibility under Act 135 to have clearance air monitoring.
1	performed on Ahls project 1
1	to al Male
1	Signature of Building Owner or Lessee Signature of Asbestos Abatement Contractor Representative
1	
_	NOTE: For affected projects, this section on the notification form must be signed when the project notification form is submitted to MDPH.
MA	AILING ADDRESSES: (For guidelines on how to complete this form, contact the appropriate MICHIGAN agencies below.)
	ESHAP, Mail to: Asbestos Coord. DNR, AQD NESHAP Projects in Wayne Co.: U.S. EPA, Region 5
1	O CFR, Part 61, Town Center, Ste. B, #200 OR Wayne Co. Health Dept., APCD AND AT-18J, Asbestos Coord.
	Subpart M 333 S. Capítol 640 Temple, Suite 700 77 W. Jackson Blvd.
1 3	Lansing, MI 48933 Detroit, MI 48201 Chicago, IL 60604
	Lansing, IVII 40201 Chicago, IL 60004
S	ec. 220(1-4) or (8), Mail to: MDPH, DOH-ASBESTOSPROGRAM.
	ublic Act 135 of 3423 N. Logan/Martin L. King Jr. Blvd.
1	
1	
1	Lansing, MI 48909 (517) 335-9482

PR 5661 (rev. 12/93)





Technical & Transportation Services Power and Utility Operations

September 23, 1994

U.S. EPA, Region 5 AT-18J, Asbesto Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing a revision notification related to the removal of asbestos during a renovation project at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan. The original notification is included with the revisions noted.

If you have any questions or require further information, please contact me at (313) 322-9016.

F. Vitale

Environmental Control Engineer

copy to: Wayne County Health Dept., APCD

640 Temple, Suite 700 Detroit, MI 48201

MDPH - Asbestos Program

3423 N. Logan/Martin L. King Jr. Blvd.

P.O. Box 30195 Lansing, MI 48909

MIDEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY
DIV., NESHAP, 40 CFR Part 61, Subpart M
(\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

(420,000 bengit) ber day ber ground	on to tandie to comply				9
DNR/MDPH USE ONLY	Double Delete			CONTRACTOR	Internal Proj. No
Postmark Date:					Power & Utility Ops.
Ok Send Def Ltr.				ss: 3001 Mille	
FOLLOWUP:II	Spoke WI:			Dearborn, M	
Comments:				VICALE RII 41	Ophone: (313) 322-9016
* *		+0		CONTRACTOR	Internal Proi. No.
Notific. No.:	Trans. No.:		Name:		<i>₹</i>
alculate MDPH Asbestos Project F	00:		Mailing Addre		
		1	City/State/Zip		
x 0	.01 =				
(Total Project Cost)	(1% Project Fee)				
Contractor License Numbers:			5. FACILITY OV	NER	Internal Proj. No.
Asbestos Abatement:			Name: Ford	Motor Co	Power & Utility Ops.
Electrical: Mechanical:			Mailing Addre	ess: 3001 Mille	er Rd.
Licensing Authority:			City/State/Zip	: Dearborn, M	11 48 2
			Contact: F.	Vitale	Phone: (313) 322-9016
Date of Notification:	AU DISTANT				
Date of Revision(s).	- 4152 L-A		6. FACILITY DE	SCRIPTION	1 2 3 47
Notification Type: Original	Revised - Cancelled -	Annual			1/1008-Boik-43
Please check all that apply:					to Rook
MDPH		1			
Demo, Reno, Encap. (>10 Ln.	. ft/15 Sq. ft) 10-day notice	- 1	Nearest Majo	or Crossroad: M 11:	er & Dix
☐ Emergency Renovation/Encap		- 1	city: Dearl	orn c	County: Way ne State: MI
NESHAP (DNR/U.S.EPA)			Size: (sq. ft.	No. cf	Ficers: Floor No.: 3
Planned Renovation 10 work	<u>îno</u> day s nctice				Prior Use: Bol-
Emergency Renovation	outoff 40 working days notice				v. Buller #3 - mest side
Scheduled Demolition aboveScheduled Demolition below			bulcen		
☐ Ordered Demolition	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			(
2. PROJECTSCHEDULE			7. DISPOSALS	SITE	
* Renovation: Start Date	() [] [] ()	5+	Name: Fo:	rd Allen Park	Clay Mine Landfill
End Date:	19/30/94	in .	Location Ad	dress: 17005 Oa	kwood Blvd.
+ Asb. Removal: Start Date	15101410131	34	City/State/Zi	. Dearborn	, MI 48101 _
End Date		AV		· 18	
+ Demolition: . Start Date		1 -/			WASTE TRANS. 2
End Date				d Trans. Serv	7.
Encapsulation: Start Date				001 Miller Rd	
End Date			City/State/Z	p: Dbn., MI 48	121 .
* Includes setup, building contain		asbestos		3 322-9016	()
· Work Schedule: Please indica	100 N				
work hours for the purpose of s	te the anticipated days of the cheduling a compliance inspe	week and	9. ORDERED	DEMOLITIONS: (See	e guidelines, obtainable by contacting ses listed on the reverse side,
			for NESHAR	definition of "Order	ad Demolition " A conv of the order
Asb. Removal: Days of the	Fri Sharald	4-120m	must accom	pany this notification	i.) Include the following information:
Per Demolition: "Person of the National	20	20 - 12 7000	District Special Section Secti	Saud 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ra (rais) i a a
Encapsulation:			Gov't Agen		
<u></u>	i phonod project (De avec to)	attach :=	Name/Title	of Person Signing Or	der
+ Check here if this is a multi- schedule showing the star	ti-phased project. Be sure to a t and end dates of <u>each</u> phas			- 2	
indicate if it is for asbestos	removal, demolition, etc.		- Date of Ord	ier	Date Ordered to Begin:
10. IS ASBESTOS PRESENT?	Yes 🚹 No 🗌			. * ×2	
Estimate the amount of asbes Also include in the right hand tw	itos: Include Regulated Asboo columns below the amount	estos Cont of non-friat	aining Material (Roble Cat. I and/or Ca	ACM) to be removed at. If ACM that will no	l, disturbed, and/or encapsulated, etc ot be removed prior to demolition.
RACM to be Removed	RACM to be Encapsulated		ble ACM not re Category I	moved before Den Category II	no. Unit of Measure
				3 7 7	☐ Ln. Ft. ☐ Ln. M.
350		1			Sa. Ft. Sa. M.

* Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces)

1.	PROJECT DESCRIPTION
7	a)Renovation: Indicate the surfaces RACM will be removed from. Encapsulation (for MDPH): Indicate surfaces to be encapsulated:
20	Piping Fittings Boiler(s) Tank(s) Piping Fittings Boiler(s) Tank(s)
K	Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s) Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s)
A) .	Other: (describe) Other: (describe)
•	
tian St	
• /	b)Method of removal: Describe how the asbestos will be removed from the surface (example: glove bag, scrape with hand tools, cut in
- 6	sections and carefully lower, etc.): cut in sections and carefully howered into home
	placed in vac-loade and Placed in bays
	The state of the s
	c)Demolition: Describe method of demolition and indicate if complete or partial demolition (If partial, describe which part will be demolished.)
#6 #6	
12.	
	removal and until proper disposal: Wet methods in conjunction with a full negative pressure
	containment will be used. Air monitoring will be done in accordance with OSHA
	regulations.
-	
13.	UNEXPECTED ASBESTOS: Describe procedures that will be followed in the event that unexpected RACM is found or previously non-friable
	asbestos becomes friable (crumbled, pulverized, reduced to powder, etc.) and therfore regulated: Approved asbestos
	abatement procedures will be followed including bulk sampling, laboratory analysis,
	abatement, clean-up and air monitoring.
14	PROCEDURE(S) USED TO DETECT THE PRESENCE OF ASBESTOS: Indicate how you determined whether or not asbestos is in the facility. If
17.	analytical sampling was used, describe method: A recent building survey identified this material as
	asbestos-containing. Any questionable material will be resampled and analyzed.
	asbestos-containing. Any questionable material will be resampled and analyzed.
15.	EMERGENCY RENOVATIONS: Date and hour of the emergency:
	Description of the sudden, unexpected event:
	Explain how the event caused unsafe conditions, would cause equipment damage and/or an unreasonable financial burden:
40	Leadif. Not as in it ideal to incline in the presidence of 10 CED Oct 61 Oct 144 in 184 in 18
76.	I certify that an individual trained in the provisions of 40 CFR Part 61, Subpart M, will be on-site during the renovation and during demolition involving RACM above the cutoff and/or during ordered demolition. Evidence that the required training has been completed by this person will be
	available for inspection during normal business hours.
550	
	doll the alican
	1000 0000 X/15/17
	Signature of Owner or Abatement Contractor Date Signature of Owner or Demolition Contractor Date
17.	. Signature Requirements for Projects with Negative Pressure Enclosures: (required by Michigan Dept. of Public Health)
	Per section 221 (1)(2) of P.A. 135 of 1986, as amended, clearance airmonitoring is required for any asbestos abatement projectinvolving 10 linear feet 15 square feet or more of friable material which is performed within a negative pressure enclosure. I (the building owner or lessee) have been advised by the contractor of my responsibility under Act 135 to have clearance air monitoring
	personned on this project
	10) 175 PM 8/15/94
	Signature of Building Owner or Lessee Signature of Asbestos Abatement Contractor Representative
	NOTE: For affected projects, this section on the notification form must be signed when the project notification form is submitted to MDPH.
	The second secon
	AILING ADDRESSES: (For guidelines on how to complete this form, contact the appropriate MICHIGAN agencies below.)
	NESHAP, Mail to: Asbestos Coord. DNR, AQD NESHAP Projects in Wayne Co.: U.S. EPA, Region 5
	40 CFR, Part 61, Town Center, Ste. B, #200 OR Wayne Co. Health Dept., APCD AND AT-18J, Asbestos Coord.
:	Subpart M 333 S. Capitol 640 Temple, Suite 700 77 W. Jackson Blvd.
	Lansing, MI 48933 Detroit, MI 48201 Chicago, IL 60604
	Sec. 220(1-4) or (8), Mail to: MDPH, DOH-ASBESTOSPROGRAM.
	Public Act 135 of 3423 N. Logan/Martin L. King Jr. Blvd.
'	1986, as amended P.O. Box 30195
	Lansing, MI 48909 (517) 335-9482

PR 5661 (rev. 12/93)

OH 142 (rev. 12/93)



OCT 28 1994

Technical & Transportation Services
Power and Utility Operations
3001 Miller Road
Dearborn, Michigan 48121

October 25, 1994

AIR TOXICS AND RADIATION BRANCH U.S. EPA, REGION V

U.S. EPA, Region 5 AT-18J, Asbestos Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604

Subject: Notification of an Emergency Removal of Asbestos -- Revision of the October 13, 1994 Planned Renovation

We are providing information related to the emergency removal of asbestos during a renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan. The original notification was send October 13, 1994.

If you have any questions or require further information, please contact me at (313) 322-9016.

Fred Vitale

Environmental Control Engineer

copy to:

Wayne County Health Dept., APCD

640 Temple, Suite 700 Detroit, MI 48201

MDPH - Asbestos Program

3423 N. Logan/Martin L. King Jr. Blvd.

P.O. Box 30195 Lansing, MI 48909

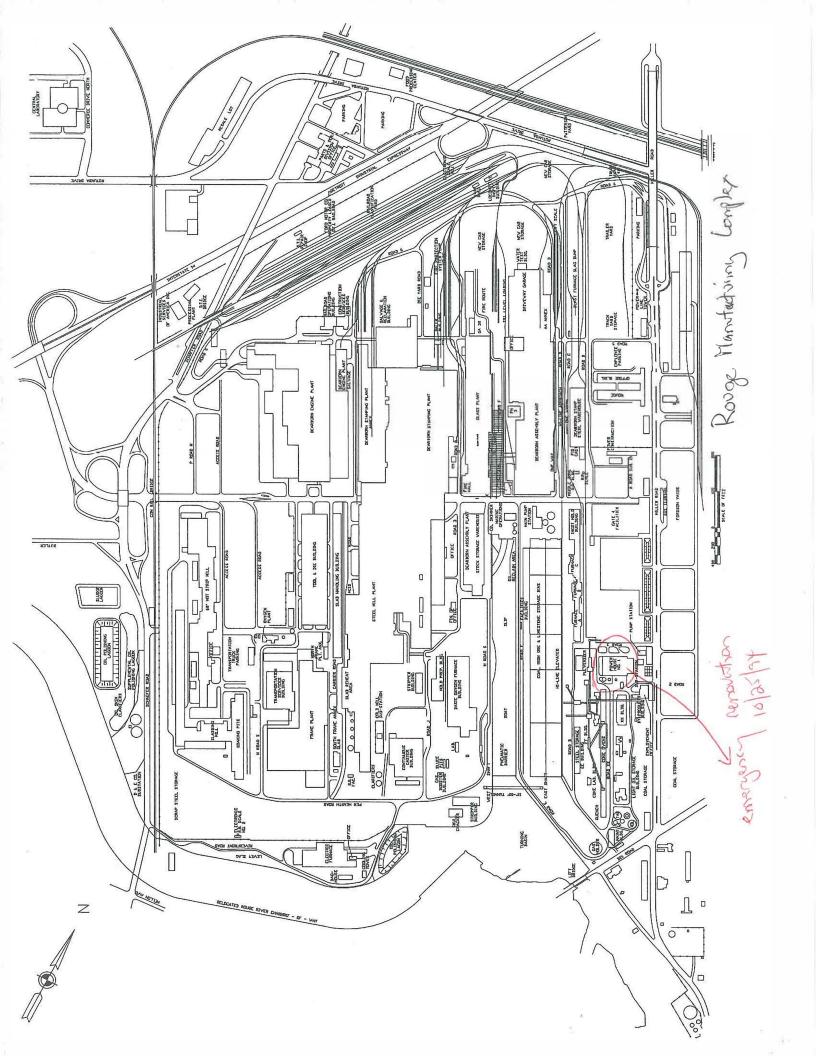
MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY
DIV., NESHAP, 40 CFR Part 61, Subpart M
(\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

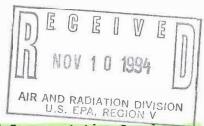
1420	too penanty per day per viol	addition failure to comply)				
	DNR/MDPHUSE ONLY Postmark Date: Ok Send Def Ltr. FOLLOW UP: / / Comments:	Date Def Ltr. Sent: Spoke w/:	_	Name: Fcrd Mailing Addre City/State/Zip	ess: 3001 Miller : Dearborn, MI	<u>Power & Utility Ops.</u> Rd.
			=	4- DEMOLITION	CONTRACTOR	Internal Proi. No.
Calcu	Notific. No.: x (Total Project Cost)	Fee:		Mailing Addre City/State/Zip		
Lico Lico	ntractor License Numbers: bestos Abatement: Electrical: Mechanical: ensing Authority: NOTIFICATION Date of Notification: Date of Revision(s): Notification Type: Original Please check all that apply: MDPH Demo, Reno, Encap. (>10 L Emergency Renovation/Enca NESHAP (DNR/U.S.EPA) Planned Renovation Scheduled Demolition above	Building: Plumbing: Cancelled n. ft/15 Sq. ft) 10-day notice apsulation	Annual	Name: Force Mailing Addr City/State/Zip Contact: F. 6. FACILITY DE Facility Name Location Ad Deanbore Nearest Maj City: Dean Size: (sq. ft. Age: 10 Specific Loc	ess: 3001_Miller b: Dearborn, MI Vitale ESCRIPTION e (or Number): Power dress: 3001_Miller or Crossroad: Miller born	Power & Utility Ops. Rd. 48121 Phone: (313) 322=9016 hove * (
2.	* Renovation: Start Date End Date * Demolition: Start Date End Date * Demolition: Start Date Encapsulation: Start Date End Date Encapsulation: Start Date Encapsulation: St	e: te: e: te: e: ainment, etc., but not removing a ate the anticipated days of the v scheduling a compliance inspective Work Hour	asbestos week and tion.	Location Activity State/Zi -8. WASTETR/ Name: For Address: City/State/Zi Phone: (9. ORDERED DNR or WC for NESHAR	Iden Park Iden Park Idensi: 17005 Oak IDEN Dearbor ANSPORTER1 IDEN TIME Red Ip: Dearborn, MI4) DEMOLITIONS: (See APCD at the addresse Definition of "Ordere	MI 48101 WASTE TRANS. 2 8121
3	Demolition: Encapsulation: + Check here if this is a muschedule showing the sta	ulti-phased project. Be sure to at art and end dates of <u>each</u> phase os removal, demolition, etc.	ttach a	Gov't Agen Name/Title	cy Ordering Demo: of Person Signing Ord	er
10.						disturbed, and/or encapsulated, etc.
*	RACM to be Removed	RACM to be Encapsulated	Non-fria		moved before Dem Category II	
	80					□ Sq. Ft. □ Sq. M. □ Cu. Ft* □ Cu. M.*

* Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

	PROJECT DESCRIPTION a)Renovation: Indicate the surface Piping Fittings Beam(s) Duct(s) Other: (describe)	Boiler(s) Tank(s) Tunnel(s) Ceiling Tile(s) ow the asbestos will be removed	Encapsulation (for MDPH): Indicate surfaces to be encapsulated: Piping Fittings Boiler(s) Tank(s) Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s) Other: (describe) from the surface (example: glove bag, scrape with hand tools, cut in	
(A.)	sections and carefully lower, etc carefully lower, wet	.): Scrape with hand to wipe and vacuum cont	ols, cut in sections with hand tools and aminated surfaces.	
	. = :		Constitute and the second control of	
	c)Demolition: Describe method of	demolition and indicate if complete	or partial demolition (If partial, describe which part will be demolished.)	
**				
•			5 8 W	4
12.	removal and until proper disposal:	Wet methods in conju	g controls used to prevent visible emissions before, during, and after nection with a full negative pressure material to prevent visible emissions and	
			that will remain leaktight until landfilled.	
13.	asbestos becomes friable (crumble	ed, pulverized, reduced to powder, otified if the amount	d in the event that unexpected RACM is found or previously non-friable etc.) and therfore regulated: See Section 12 Appropriate of unexpected asbestos found is at least	5
14.	analytical sampling was used, desc materials were teste	cribe method: A recent bui	S: Indicate how you determined whether or not asbestos is in the facility. If lding survey was conducted and all suspect light microscopy method, material is assumed be RACM.	
15.	EMERGENCY RENOVATIONS: Da Description of the sudden, unexpertended of the sudden, unexpertended of the sudden of t	cted event: A major his forced forward this safe conditions, would cause equip	ment damage and/or an unreasonable financial burden: The lack	
16.		nd/or during ordered demolition.	Subpart M, will be on-site during the renovation and during demolition vidence that the required training has been completed by this person will be	e
	Total Hata	12/94		
	Signature of Owner or Abatement	Contractor Date	Signature of Owner or Demolition Contractor Date	7
17.	Persection 221 (1)(2) of P.A. 135 of 1986, as an which is performed within an egative pressure general arthis project. Signature of Building Owner or Lessee	nended, clearance air monitoring is required fo enclosure. I (the building owner or lessee) hav	Enclosures: (required by Michigan Dept. of Public Health) rany asbestos abatement project involving 10 linear feet/15 square feet or more of friable material elbeen advised by the contractor of my responsibility under Act 135 to have clearance air monitoring Signature of Asbestos Abatement Contractor Representative	•
-	NOTE: For affected projects, this section on	the notification form must be signed when the	project notification form is submitted to MDPH.	_
N	AILING ADDRESSES: (For gu IESHAP, Mail to: IO CFR, Part 61, Subpart M	Asbestos Coord, DNR, AQD	rm, contact the appropriate MICHIGAN agencies below.) NESHAP Projects In Wayne Co.: Wayne Co. Health Dept., APCD 640 Temple, Suite 700 Detroit, MI 48201 U.S. EPA, Region 5 AT-18J, Asbestos Coo 77 W. Jackson Blvd. Chicago, IL 60604	ord.
F	Sec. 220(1-4) or (8), Mailto: Public Act 135 of 1986, as amended	MDPH, DOH-ASBESTOS PROGRA 3423 N. Logan/Martin L. King Jr. I P.O. Box 30195 Lansing, MI 48909 (57		
PR	5661 (rev. 12/93)		OH 142 (rev. 12/	931







Technical & Transportation Services
Power and Utility Operations
3001 Miller Road
Dearborn, Michigan 48121

November 7, 1994

U.S. EPA, Region 5 AT-18J, Asbestos Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the revision of two notices for the removal of asbestos during renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan, originally submitted on October 19, 1994.

If you have any questions or require further information, please contact me at (313) 322-9016.

. Vitale

Environmental Control Engineer

copy to:

Wayne County Health Dept., APCD 640 Temple, Suite 700

Detroit, MI 48201

MDPH - Asbestos Program

3423 N. Logan/Martin L. King Jr. Blvd.

P.O. Box 30195 Lansing, MI 48909

MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY
DIV., NESHAP, 40 CFR Part 61, Subpart M
(\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

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	DNR/MDPH USE ONLY	3	ABATEMEN	TCONTRACTOR	Internal Proj. No.
	Postmark Date: Rec'd Date:	A1000A1			ower & Utility Ops.
	Ok Send Def Ltr. Date Def Ltr. Sent:	7		ess: 3001 Miller	
	FOLLOW UP: / _ / _ Spoke w/:			: Dearborn, MI	
	Comments:				Phone: (313) 322-9016
		_			
		4.	DEMOLITIO	NCONTRACTOR	Internal Proj. No.
- 1	Notific. No.: Trans. No.:		Name:	and the second state of the second se	
Color			Mailing Addr	ess:	
Calci	llate MDPH Asbestos Project Fee:		City/State/Zip	p:	
	x 0.01 =	_	Contact:		Phone: ()
	(Total Project Cost) x 0.01 = (1% Project Fee)				
Co	ntractor License Numbers:	5.			Internal Proj. No.
As	bestos Abatement:Building:	_	Name: For	d Motor Co Po	ower & Utility Ops.
	Electrical:Plumbing:	- 1		ress: 3001 Miller	
	Mechanical:			p: Dearborn, MI	
LIC	ensing Authority:		Contact: F.	Vitale	Phone: (313) 322-9016
1.	NOTIFICATION	-			
1.0	Date of Notification: 10 19 94	- 6.	. FACILITY D		s.L .
	Notification Type: Original Revised Cancelled Ann	nual	Facility Nam	ne (or Number): Power	nouse No-1
	Please check all that apply:		Location Ac	ddress: <u>300) Mil</u>	her Road
	MDPH			Hotel map)	
	Demo, Reno, Encap. (>10 Ln. ft/15 Sq. ft) 10-day notice			jor Crossroad: MH1e	r & Dix
	Emergency Renovation/Encapsulation		City: Dear	born Cou	unty:Wayne State: MI
	NESHAP (DNR/U.S.EPA)	36	Size: (sq. ft	1)282 000 No. of Flo	oors: T Floor No.: 3ch
	Planned Renovation 10 working days notice		Age: 754	Present Use: Pour	Thoux Prior Use: Power house
	☐ Emergency Renovation ☐ Scheduled Demolition above cutoff- 10 working days notice				3rd floor Balcony
	Scheduled Demolition below cutoff - 10 working days notice		cost soil	le of Boiler #3	7 7
	Ordered Demolition				
2.	PROJECTSCHEDULE	7	. DISPOSAL	SITE	
	* Renovation: Start Date:		Name: For	rd Allen Park C	lay Mine Landfill
	End Date:		Location Ad	ddress: 17005 Oakw	ood Blvd.
	+ Asb. Removal: Start Date: 11) 94 11.269	7		ir. Dearborn	
	End Date: 11/15/84 12 12 12	¥. -			•
42.2	+ Demolition: Start Date:	- 8	[A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		WASTE TRANS. 2
	End Date:	H1		rd Trans. Svcs.	
	Encapsulation: Start Date:		Address:	3001 Miller Rd.	101
	End Date:		City/State/Z	Lip:Dearborn,MI48	121 .
	* Includes setup, building containment, etc., but not removing asbes	stos	Phone: ()	()
	Work Schedule: Please indicate the anticipated days of the week	and	OPPEDED	DEMOLITIONS: (SAS =	uidelines, obtainable by contacting
	work hours for the purpose of scheduling a compliance inspection.		- DNR or WC	APCD at the addresses	listed on the reverse side,
*	Days of the Week Work Hours		for NESHAL	P definition of "Ordered	Demolition." A copy of the order Include the following information:
	Asb. Removal: Non-Fn 8am-4pm Demolition:			inpany tris notification.)	
+			Gov't Agen	icy Orderina Demo:	8 E 8
A.	Encapsulation:				·
	+ Check here if this is a multi-phased project. Be sure to attach				(2) Management and Association (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
	schedule showing the start and end dates of each phase and indicate if it is for asbestos removal, demolition, etc.	.	Date of Ord	der: Da	ate Ordered to Begin:
40				0	. u u
10.		C	e Melecial /5	ACM) to be recoved 1	inturbed and/or apparentated at
	Estimate the amount of asbestos: Include Regulated Asbestos Also include in the right hand two columns below the amount of non-				
					
	RACM to be RACM to be Removed Encapsulated	Cate		moved before Demo. Category II	Unit of Measure
			J, -		
	250				Ln. Ft. Ln. M.
	350				Sq. Ft. Sq. M. Cu. Ft * Cu. M.*
					Cu. Ft * Cu. M.*
4 10000	Volume (cubic feet/cubic meter) should be used only if unable to me		Parada a district	ere magazira /aw if anh	antes has fallen off surfaces

NOTIFICATION OF INTENT TO RENOVATE OR DEMOLISH (continued)

11.	PROJECT DESCRIPTION -	Significance of	* 1	v.*.
•	a)Renovation: Indicate the surface	es RACM will be removed from	Encapsulation (for MDPH): Indi	icate surfaces to be encapsulated:
	Piping Fittings	Boiler(s) Tank(s)	Piping Fittings	Boiler(s) Tank(s)
			Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)
		Tunnel(s) Ceiling Tile(s)	1	
	Other: (describe)		Other: (describe)	
		NI		
1411	hittathad at animala Dagaina h	Enter	10 H	and a second to the second to
25			rom the surface (example: glove bag, s	
	sections and carefully lower, etc	Scrape with hand too	ols, cut in sections with	hand tools and
	carefully lower, wet	wipe and vacuum conta	minated surfaces.	2 222
***		Wage and Vacuum pones		
(40) F		2.31	Market Market and All Market and All Andrews	
G. (6)	c)Demolition: Describe method of	demolition and indicate if complete	or partial demolition (If partial, describ	e which part will be demolished.)
		g # 85g U		
	P			
			T P	and the second s
12.	ENGINEERING CONTROLS: Des	cribe work practices and engineerin	g controls used to prevent visible emiss	ions before, during, and after
	removal and until proper disposal:	Wet methods in conju	action with a full negat	ive pressure
			material to prevent visi	
			that will remain leaktion	
	prace wet material in		that with I digit teakers	and and rander real
13	LINEYPECTED ASPESTOS: Desc	cribe precedures that will be followed	in the event that unexpected RACM is	found or proviously non-friable
13.				
			etc.) and therfore regulated: _ <u>See_S</u>	
	agencies will be re-n	otified if theamount of	of unexpected asbestos for	ound is at least
	20% different than pr			
14.	PROCEDURE(S) USED TO DETEC	T THE PRESENCE OF ASBESTOS	: Indicate how you determined whether	or not asbestos is in the facility. If
			lding survey was conduct	
			- 1 100020	
	<u>materials were teste</u>	<u>d using the polarized</u>	light microscopy method	, material is assumed
	to contain asbestos	and is considered to l	DE RACM	
-			10000 TW	
15.	EMERGENCY RENOVATIONS: Da	ate and hour of the emergency:		
	Description of the sudden, unexpe	cted event:		
		2	9 ^(S)	
	Will be the State of the State			1000000
	Explain how the event caused ups	safe conditions would cause equing	nent damage and/or an unreasonable fi	nancial hurden:
	LAPIANT HOW the event caused this	ate conditions, would cause equipi	nent damage and/or art diffeasonable in	lancial burden.
		The same of the sa		
10	Leadify that an individual trained in	the provisions of 40 CEP Part 61 S	Subpart M, will be on-site during the rend	oustion and during domolition
16.			vidence that the required training has be	
	available for inspection during nor		riderice that the required training has be	en completed by this person will be
	O is a	nai business nours.	8 2 2	
10	1111	1 101		
	- And West	10/19/94		
	Signature of Owner or Abatement	Contractor Date	Signature of Owner or Demolition Co	ontractor Date
	Orași de la compania		- MARKET CONTRACTOR OF THE CON	
17.	Signature Regulrements for Pr	piects with Negative Pressure I	Enclosures: (required by Michigan	Dont of Bublic Health)
1			any asbestos abatement project involving 10 linearf	
1	which is performed within a negative pressure	,	been advised by the contractor of my responsibility (•
	performed on this project \ \ \			
1	A COLUMN		Se .	
1	Signature of Building Owner or Lessee		Signature of Asbestos Abatement Contractor Re	presentative
1	NOTE: 5	(*)	the office of the second state of the second	
	NOTE: For affected projects, this section on	the notification form must be signed when the p	project notification form is submitted to MDPH.	
M	AILING ADDRESSES: (For gu	idelines on how to complete this for	m, contact the appropriate MICHIGAN	agencies below.)
		Asbestos Coord. DNR, AQD	NESHAP Projects in Wayne Co.:	U.S. EPA, Region 5
10	0 CFR, Part 61,		Wayne Co. Health Dept., APCD	AND AT-18J, Asbestos Coord.
	Subpart M		·	
1	Juppair in	333 S. Capitol	640 Temple, Suite 700	77 W. Jackson Blvd.
		Lansing, MI 48933	Detroit, MI 48201	Chicago, IL 60604
	Soc 220/4 4) or (9) Name	MODU DOU ACRECTOS PROCES	es	
•	Sec. 220(1-4) or (8), Mail to:	MDPH, DOH-ASBESTOS PROGRA		
ŧ.	Public Act 135 of	3423 N. Logan/Martin L. King Jr. B	lvd.	0
1	986, as amended	P.O. Box 30195		28
		Lansing, MI 48909 (51)	7) 335-9482	

PR 5661 (rev. 12/93)

MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY DIV., NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

\$25,000 penalty per day per viola	don for failure to comply)				
DNR/MDPH USE ONLY Postmark Date: Ok Send Def Ltr. FOLLOW UP: / / Comments:	Date Def Ltr. Sent:		Name: Fcrd Mailing Addres City/State/Zip:	ss:3001 Miller Dearborn, MI	Internal Proj. No. Power & Utility Ops. Rd. 48121 Phone: (313) 322-9016
Notific. No.: x [Total Project Cost]	Trans. No.:		Name: Mailing Addre City/State/Zip:		
Contractor License Numbers: Asbestos Abatement: Electrical: Mechanical: Licensing Authority: NOTIFICATION Date of Notification: Date of Revision(s): Notification Type: Original Please check all that apply: MDPH Demo, Reno, Encap. (>10 Li Emergency Renovation/Encan NESHAP (DNR/U.S.EPA) Planned Renovation Emergency Renovation Scheduled Demolition above Scheduled Demolition below Ordered Demolition	Building: Plumbing: Revised Cancelled Cancell	Annual	Mailing Addres City/State/Zip Contact: F. 6. FACILITY DE Facility Name Location Add (See Contact Major City: Dear) Size: (sq. ft. Age: 75 Specific Location	Motor Co.— In the session of the ses	Power & Utility Ops. Rd. 1 48121 Phone: (313) 322-9016 house No.1 er & Dix ounty: Wayne State: MI Floors: 7 Floor No.: 2nd x/sss Prior Use: Powerhouse y: \$5 generats
2. PROJECT SCHEDULE * Renovation: Start Date End Date + Asb. Removal: Start Date End Date	e:		Location Ad	d Allen Park dress: <u>17005 Oak</u> Dearbor	rn, MI 48101
+ Demolition: Start Dat End Dat Encapsulation: Start Dat	te: e: e: e:		Name: For	d Trans. Svcs 001 Miller Ro p:Dearborn,MI4	
Work Schedule: Please indic work hours for the purpose of Days of Asb. Removal: \(\frac{\tau_0n-F}{\text{con-F}}\) Demolition: Encapsulation: + \(Check here if this is a muschedule showing the state of the	ate the anticipated days of the scheduling a compliance inspite the Week Work H	e week and ection.	- DNR or WC for NESHAF must accom Gov't Agen Name/Title	APCD at the address of definition of "Ordere pany this notification by Ordering Demo: of Person Signing Ordere	der.
10. IS ASBESTOS PRESENT?	Yes X No	bestos Cont	taining Material (Roble Cat. I and/or Ca	ACM) to be removed	, disturbed, and/or encapsulated, etc t be removed prior to demolition.
RACM to be Removed	RACM to be Encapsulated	Non-fria		moved before Dem Category II	Unit of Measure
80					

^{*} Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

1.	PROJECT DESCRIPTION
	a)Renovation: Indicate the surfaces RACM will be removed from. Encapsulation (for MDPH): Indicate surfaces to be encapsulated:
Z.	☑ Piping ☐ Fittings ☐ Boiler(s) ☐ Tank(s) ☑ Piping ☐ Fittings ☐ Boiler(s) ☐ Tank(s)
	Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s) Beam(s) Duct(s) Tunnel(s) Ceiling Tile(s)
*	Other: (describe) Other.
Ċ	b)Method of removal: Describe how the asbestos will be removed from the surface (example: glove bag, scrape with hand tools, cut in
	sections and carefully lower, etc.): Scrape with hand tools, cut in sections with hand tools and
	carefully lower, wet wipe and vacuum contaminated surfaces.
•••	carerary rower, wet wife and vacadin concentrated Surfaces.
	to the control of the
	c)Demolition: Describe method of demolition and indicate if complete or partial demolition (If partial, describe which part will be demolished.)
-	
2.	ENGINEERING CONTROLS: Describe work practices and engineering controls used to prevent visible emissions before, during, and after
	removal and until proper disposal: Wet methods in conjunction with a full negative pressure
	containment will be used. Adequately wet material to prevent visible emissions and
	place wet material in leaktight containers that will remain leaktight until landfilled.
3.	UNEXPECTED ASBESTOS: Describe procedures that will be followed in the event that unexpected RACM is found or previously non-friable
	asbestos becomes friable (crumbled, pulverized, reduced to powder, etc.) and therfore regulated: See Section 12 Appropriate
	agencies will be re-notified if theamount of unexpected ashestos found is at least
	20% different than previously reported.
	200 different chair previously reported.
4.	PROCEDURE(S) USED TO DETECT THE PRESENCE OF ASBESTOS: Indicate how you determined whether or not asbestos is in the facility. If
•	analytical sampling was used, describe method: A recent building survey was conducted and all suspect
	materials were tested using the polarized light microscopy method, material is assumed
	to contain asbestos and is considered to be RACM
15.	EMERGENCY RENOVATIONS: Date and hour of the emergency:
	Description of the sudden, unexpected event:
	Explain how the event caused unsafe conditions, would cause equipment damage and/or an unreasonable financial burden:
-	
16.	
	involving RACM above the cutoff and/or during ordered demolition. Evidence that the required training has been completed by this person will be available for inspection during normal business hours.
	available for inspection during normal business mours.
	16),6,000
	- All Union 10/19/19
	Signature of Owner or Abatement Contractor Date Signature of Owner or Demolition Contractor Date
	·
17.	
	Persection 221 (1)(2) of P.A. 135 of 1986, as amended, clearance air monitoring is required for any asbestos abatement project involving 10 linear feet/15 square feet or more of friable material which is performed within a negative pressure enclosure. I (the building owner or lessee) have been advised by the contractor of my responsibility under Act 135 to have clearance air monitoring
	personned on this priject
	The state of the s
	Signature of Building Owner or Lessee Signature of Asbestos Abatement Contractor Representative
	Cigration of Contract of Contr
	NOTE: For affected projects, this section on the notification form must be signed when the project notification form is submitted to MDPH.
M	AILING ADDRESSES: (For guidelines on how to complete this form, contact the appropriate MICHIGAN agencies below.)
	NESHAP, Mail to: Asbestos Coord. DNR, AQD NESHAP Projects in Wayne Co.: U.S. EPA, Region 5
	10 CFR, Part 61, Town Center, Ste. B, #200 OR Wayne Co. Health Dept., APCD AND AT-18J, Asbestos Coord.
	Subpart M 333 S. Capitol 640 Temple, Suite 700 77 W. Jackson Blvd.
`	Lansing, MI 48933 Detroit, MI 48201 Chicago, IL 60604
	Editioning, the Topology Desired in Topology of Topology, the Oddo T
,	Sec. 220(1-4) or (8), Mail to: MDPH, DOH-ASBESTOS PROGRAM.
	Public Act 135 of 3423 N. Logan/Martin L. King Jr. Blvd.
	1986, as amended P.O. Box 30195
,	Lansing, MI 48909 (517) \$35-9482
	Landing, MI TOUCO (OII) WOO O'TOL

PR 5661 (rev. 12/93)



Technical & Transportation Services Power and Utility Operations 3001 Miller Road Dearborn, Michigan 48121

November 21, 1994

U.S. EPA, Region 5 AT-18J, Asbestos Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604 NOV 2 3 1994

AIR TOXICS AND PACIATION
THE EPA REGION V

Subject: Second Revision of Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the second revision of a notice for the removal of asbestos during renovation at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan, originally submitted on October 19, 1994, first revised November 7, 1994.

If you have any questions or require further information, please contact me at (313) 322-9016.

F. Vitale

Environmental Control Engineer

copy to:

Wayne County Health Dept., APCD

640 Temple, Suite 700 Detroit, MI 48201

MDPH - Asbestos Program

3423 N. Logan/Martin L. King Jr. Blvd.

P.O. Box 30195

Lansing, MI 48909

MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY DN ... NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

DNR/MDPH USEONLY Postmark Date: Rec'd Date:	
Ok Send Def Ltr. Date Def Ltr. Sent: FOLLOW UP: // / Spoke w/: Comments:	3. ABATEMENT CONTRACTOR Internal Proj. No. Name: Fcrd Motor Co Power & Utility Ops. Mailing Address: 3001 Miller Rd. City/State/Zip: Dearborn, MI 48121 Contact: F.Vitale Rm 410 Phone: (313) 322-9016
Notific. No.: Trans. No.:	4. DEMOLITION CONTRACTOR Internal Proj. No. Name:
alculate MDPH Asbestos Project Fee:	Mailing Address:
v 0.01 m	City/State/Zip:
(Total Project Cost) x 0.01 = (1% Project Fee)	Contact:Phone: ()
Contractor License Numbers: Asbestos Abatement: Building: Plumbing: Mechanical: Plumbing:	5. FACILITY OWNER Internal Proj. No. Name: Ford Motor Co Power & Utility Ops. Mailing Address: 3001 Miller Rd. City/State/Zip: Dearborn, MI 48121
Licensing Authority:	Contact: F. Vitale Phone: (313) 322-9016
NOTIFICATION Date of Notification: 1019 94 Date of Revision(s): 112 94 Notification Type: ☑ Original ☑ Revised ☐ Cancelled ☐ Annua	6. FACILITY DESCRIPTION Facility Name (or Number): Power house Nb - 1
Please check all that apply:	Location Address: 3001 Milker Read
MCPH Demo, Reno, Encap. (>10 Ln. ft/15 Sq. ft) 10-day notice Emergency Renovation/Encapsulation NESHAP (DNR/U.S.EPA) Planned Renovation 10 working days notice Emergency Renovation Scheduled Demolition above cutoff- 10 working days notice Scheduled Demolition below cutoff - 10 working days notice	Age:Present Use: Pourthoux Prior Use: Pourthouse
- To 1 10 mi	
C Ordered Demolition	** *** ***
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2. PROJECT SCHEDULE * Renovation: Start Date:	Name: Ford Allen Park Clav Mine Landfill
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* Renovation: Start Date: End Date: + Asb. Removal: Start Date: 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Name: Ford Allen Park Clay Mine Landfill Location Address: 17005 Oakwood Blvd. City/State/Zir. Dearborn, MI 48101
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PROJECT SCHEDULE * Renovation: Start Date: End Date: + Asb. Removal: Start Date: + Demolition: Start Date: - End Date: - End Date: - End Date: - End Date:	Name: Ford Allen Park Clay Mine Landfill Location Address: 17005 Oakwood Blvd. City/State/Zir
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^{*} Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

b)Method of removal: Describe has sections and carefully lower, etc.	Boiler(s) Tank(s) Tunnel(s) Ceiling Tile(s) ow the asbestos will be removed from Scrape with hand tools	Piping Fittings Beam(s) Duct(s) Other: (describe) the surface (example: glove bag, so	ate surfaces to be encapsulated: Boiler(s) Tank(s) Tunnel(s) Ceiling Tile(s) crape with hand tools, cut in hand tools and
carefully lower, wet	wipe and vacuum contami	inated surfaces.	
		The control of the co	
- c)Demolition: Describe method of	demolition and indicate if complete or	partial demolition (If partial, describe	which part will be demolished.)
removal and until proper disposal:	cribe work practices and engineering of Wet methods in conjunc	tion with a full negati	ve pressure
	sed. Adequately wet mat leaktight containers t		
. UNEXPECTED ASBESTOS: Desc	ribe procedures that will be followed in	the event that unexpected RACM is	found or previously non-friable
	ed, pulverized, reduced to powder, etc.		
	otified if theamount of		
20% different than pr	eviously recorted.		
PROCEDURE(S) USED TO DETEC			
	ribe method: A recent build		
	d using the colarized 1		material is assumed
to contain asbestos	and is considered to be	RACM	
5. EMERGENCY RENOVATIONS: Da	ate and hour of the emercency:		0
Description of the sudden, unexpe			
	9 2 2.	1	
Explain how the event caused uns	safe conditions, would cause equipmen	nt damage and/or an unreasonable fin	ancial burden:
	4 - 2		
	11 11 11 11 11 11 11 11 11 11 11 11 11		
3. I certify that an individual trained in involving RACM above the cutoff a available for inspection during nor	ind/or during ordered demolition. Evident		
Signature of Owner or Abatement	Contractor Date	Signature of Owner or Demolition Co	ntractor Date
	ojects with Negative Pressure End nended, clearance airmonitoring is required for any enclosure. I (the building owner or lessee) have be	rasbestos abatement projectinvolving 10 linearfe	eet/15 square feet or more of triable material
_ Not Uses		\\\\\\\\\\	: : : : : : : : : : : : : : : : : : :
Signature of Building Owner or Lessee	2●6	Signature of Asbestos Abatement Contractor Re	presentative
NOTE: For affected projects, this section on	the notification form must be signed when the proje	ect notification form is submitted to MOPH.	North title
MAILING ADDRESSES: (For gu NESHAP, Mail to:	idelines on how to complete this form, Asbestos Coord. DNR, AQD	contact the appropriate MICHIGAN a	agencies below.) U.S. EPA, Region 5
40 CFR, Part 61,	Town Center, Ste. B, #200 OR	Wayne Co. Health Dept., APCD	AND AT-18J, Asbestos Coord.
Subpart M	333 S. Capitol	640 Temple, Suite 700	77 W. Jackson Blvd.
4	Lansing, MI 48933	Detroit, MI 48201	Chicago, IL 60604
Sec. 220(1-4) or (8), Mail to:	MDPH, DOH-ASBESTOS PROGRAM.		54
Public Act 135 of	3423 N. Logan/Martin L. King Jr. Blvd		8
1986, as amended	P.O. Box 30195		*
a a	Lansing, MI 48909 (517)	335-9482	

R 5661 (rev. 12/93)



Technical Transportations

Technical Transportations

Technical Transportations

Towns and Utility Operations

3001 Miller Road

Dearborn, Michigan 48121

Body & Assembly Operations

October 19, 1994

U.S. EPA, Region 5 AT-18J, Asbestos Coordinator 77 W. Jackson Blvd. Chicago, Illinois 60604

Subject: Notification of Intent to Remove Asbestos During a Renovation Project

We are providing information related to the removal of asbestos during two renovations at the Powerhouse in the Ford Motor Company Rouge Manufacturing Complex at 3001 Miller Road, Dearborn, Michigan.

If you have any questions or require further information, please contact me at (313) 322-9016.

Fred Vitale

Environmental Control Engineer

copy to: Wayne County Health Dept., APCD

640 Temple, Suite 700 Detroit, MI 48201

MDPH - Asbestos Program

3423 N. Logan/Martin L. King Jr. Blvd.

P.O. Box 30195 Lansing, MI 48909

MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY DIV., NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

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	DNR/MDPH USE ONLY	3 ARATERIE	NT CONTRACTOR	Internal Proj. No.
	Postmark Date: Rec'd Date:			
				ower & Utility Ops.
			dress: 3001 Miller	
	FOLLOW UP:/ Spoke w/:		Zip: Dearborn, MI	
	Comments:	Contact:	F.Vitale Rm 410	Phone: (313) 322-9016
		0 4		
		4. DEMOLIT	ON CONTRACTOR	Internal Proj. No.
	Notific. No.: Trans. No.:	Name:		
Cala	ulate MDPH Asbestos Project Fee:	Mailing Ad	dress:	
Caic	uiate MDFH Asbestos Floject ree.		Zip:	
	x 0.01 =	Contact:		Phone: ()
	(Total Project Cost) (1% Project Fee)			
C	ontractor License Numbers:	5. FACILITY	OWNER	Internal Proj. No.
	sbestos Abatement: Building:			ower & Utility Ops.
•	Electrical: Plumbing:		dress: 3001 Miller	
	Mechanical:		zip: Dearborn, MI	
Li	censing Authority:			
4	NOTIFICATION	Contact: I	. VILdIE	Phone: (313) 322-9016
1.	Date of Revision(s):			
12	Date of Revision(s):	6. FACILITY	DESCRIPTION ,	, ,
	Notification Type: 🔀 Original 🗌 Revised 🗍 Cancelled 🔲 Annual	Facility Na	me (or Number): Power	NOUSE NO.
	Please check all that apply:	Location	Address: 300) Mil	kr Ksad
	MDPH	<u>(</u> ડ્રેસ્ટર	attached map	MOCEUMATION
	Demo, Reno, Encap. (>10 Ln. ft/15 Sq. ft) 10-day notice	Nearest N	lajor Crossroad: Mt le	c & Dix
	Emergency Renovation/Encapsulation	City: Dea	arborn Coa	unty:WayneState: MI
	NESHAP (DNR/U.S.EPA)			oors: Floor No.: 3ch
	Planned Renovation 10 working days notice			houx Prior Use: Pour house
	☐ Emergency Renovation ☐ Scheduled Demolition above cutoff- 10 working days notice	Specific I	ocation(s) Within Facility	3rd Floor Balcony
	Scheduled Demolition below cutoff - 10 working days notice	enst s	ide of Boiler #3	2 5 3 1 1 3 7 3 7 3 7 3 7 3 7 3 7 3 7 3 7 3
	constants Bonnellion bolon cotton 10 Menting Cayo notice			
	Ordered Demolition			
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NOTIFICATION OF INTENT TO RENOVATE OR DEMOLISH (continued)

11.	PROJECT DESCRIPTION		-11a	N. S.
	a)Renovation: Indicate the surface	es RACM will be removed from.	Encapsulation (for MDPH): Indica	te surfaces to be encapsulated:
	Piping Fittings	Boiler(s) Tank(s)		Boiler(s) Tank(s)
	Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)	Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)
				j taliliele,
	Other: (describe)	:	Other: (describe)	
0 =				
20	hiMethod of removal: Describe h	now the ashestos will be removed from	the surface (example: glove bag, scra	age with hand tools, cut in
11 11	sections and carefully lower, etc	"" Scrape with hand tool	s. cut in sections with	hand tools and
V	carefully lower, wet	wipe and vacuum contam	inated surfaces.	
0.000	Market Market P. C.			
22.50	* 14 21 +1 +1 +1		The state of the second section is	
	c)Demolition: Describe method of	demolition and indicate if complete or	partial demolition (If partial, describe v	which part will be demolished.)
-51	2/ #8	a in the second		AND
11272	to a	- WARROW STANDARD COMMUNICATION OF THE STANDARD COMMUNICATION OF T		
12	ENCINEEDING CONTROLS: Doc	cribe work practices and engineering c	ontrols used to prevent visible emission	s before during and after
12.			tion with a full negativ	
	containment will be u	sed. Adequately wet ma	terial to prevent visibl	e emissions and
	place wet material in	<u>leaktight containers t</u>	<u>nat will remain leaktigh</u>	t until landfilled.
				de la constitución de la constit
13.			the event that unexpected RACM is for	
	asbestos becomes friable (crumble	ed, pulverized, reduced to powder, etc) and therfore regulated: <u>See Sec</u>	tion 12 Appropriate
337	agencies will be re-n	otified if theamount of	unexpected ashestos fou	nd is at least
	20% different than pr	eviously reported.		
14.	PROCEDURE(S) USED TO DETEC	T THE PRESENCE OF ASBESTOS: I	ndicate how you determined whether or	not asbestos is in the facility. If
ĺ			ing survey was conducted	
			ight microscopy method.	materia: is assumed.
	to contain aspestos	and is considered to be	RACM.	
1				ı
40	EMERGENCY DENOVATIONS, D.	ate and have of the americans.		23
15.	EMERGENCY RENOVATIONS: D		y=	
15.	EMERGENCY RENOVATIONS: Description of the sudden, unexpe			
15.			12 Secretary	
15.	Description of the sudden, unexpe	cted event:		
15.	Description of the sudden, unexpe	cted event:	it damage and/or an unreasonable finar	ncial burden:
15.	Description of the sudden, unexpe	cted event:	nt damage and/or an unreasonable finar	ncial burden:
15.	Description of the sudden, unexpe	cted event:	it damage and/or an unreasonable finar	ncial burden:
	Description of the sudden, unexpe	cted event:safe conditions, would cause equipmen		
	Explain how the event caused uns	cted event:safe conditions, would cause equipmer the provisions of 40 CFR Part 61, Sub	part M, will be on-site during the renova	tion and during demolition
	Explain how the event caused uns	the provisions of 40 CFR Part 61, Sub		tion and during demolition
	Explain how the event caused uns	the provisions of 40 CFR Part 61, Sub	part M, will be on-site during the renova	tion and during demolition
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	Explain how the event caused uns	the provisions of 40 CFR Part 61, Sub and/or during ordered demolition. Evidental business hours.	part M, will be on-site during the renova ence that the required training has been	tion and during demolition completed by this person will be
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16.	Explain how the event caused unsuper light that an individual trained in involving RACM above the cutoff a available for inspection during non-Signature of Owner or Abatement	the provisions of 40 CFR Part 61, Sub and/or during ordered demolition. Evidenal business hours. Contractor Date	part M, will be on-site during the renova ence that the required training has been Signature of Owner or Demolition Contr	tion and during demolition completed by this person will be actor Date
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16.	Explain how the event caused unsuper light that an individual trained in involving RACM above the cutoff available for inspection during nor Signature of Owner or Abatement Signature Requirements for Propersection 221(1)(2) of P.A. 135 of 1986, as an which is on the research of the re	the provisions of 40 CFR Part 61, Sub and/or during ordered demolition. Evidental business hours. Contractor Date Diects with Negative Pressure Encladed, clearance air monitoring is required for any	part M, will be on-site during the renova ence that the required training has been Signature of Owner or Demolition Contr	tion and during demolition completed by this person will be actor Date Date Ppt. of Public Health) 15 square fector more of friable material
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MI DEPT. OF NATURAL RESOURCES (MDNR), AIR QUALITY DIV., NESHAP, 40 CFR Part 61, Subpart M (\$25,000 penalty per day per violation for failure to comply)

MI DEPT. OF PUBLIC HEALTH (MDPH), ASBESTOS PROGRAM P.A. 135 OF 1986, as amended, Section 220(1-4) or (8)

	DNR/MDPH USE ONLY Postmark Date: Ok Send Def L' FOLLOW UP: / / Comments:			Name: Fcr Mailing Addr City/State/Zi	d Motor Co Po ress: 3001 Miller R p: Dearborn, MI	
Co As Lic	Notific. No.:	t Fee: 0.01 =		4. DEMOLITION Name: Mailing Add City/State/Zicontact: 5. FACILITY ON Name: For Mailing Add City/State/Zicontact: F. 6. FACILITY Discontact: Facility Name: Facility Nam	ress: p: P WNER d Motor Co Pow ress: 3001 Miller R ip: Dearborn, MI Vitale	hone: ()
		Ln. ft/15 Sq. ft) 10-day notice capsulation		Nearest Ma City: <u>Dear</u> Size: (sq. fl Age: 75 Specific Lo	1)282,000 No. of Floo	ty: Wayne State: MI rs: 7 Floor No.: 2nd size Prior Use: Powchsike
2.	+ Asb. Removal: Start Da	te:		Location A		
	End Da Encapsulation: Start Da End Da * Includes setup, building con	ite: ate: te: tainment, etc., but <u>not</u> removing	g asbestos	Address:	rd Trans. Svcs. 3001 Miller Rd. Up:Dearborn,MI481	21
# # # # # # # # # # # # # # # # # # #	Work Schedule: Please indicate the anticipated days of the week and work hours for the purpose of scheduling a compliance inspection. Days of the Week Work Hours Asb. Removal: 100 - FM 200 - 400 Demolition: Encapsulation: + Check here if this is a multi-phased project. Be sure to attach a schedule showing the start and end dates of each phase and indicate if it is for asbestos removal, demolition, etc.			DNR or WCAPCD at the addresses listed on the reverse side, for NESHAP definition of "Ordered Demolition." A copy of the order must accompany this notification.) Include the following information: Gov't Agency Ordering Demo: Name/Title of Person Signing Order:		
	***************************************	MANAGER TO THE TOTAL CONTRACTOR OF THE TOTAL CONTRACTO		L Date of Or	Date	S. J. Joint to Dogan,
10.	IS ASBESTOS PRESENT? Estimate the amount of asb Also include in the right hand					urbed, and/or encapsulated, etc. removed prior to demolition.
	RACM to be Removed	RACM to be Encapsulated		ble ACM not re ategory I	moved before Demo. Category II	Unit of Measure
et U	80				10	□ Ln. Ft. Ln. M. □ Sq. Ft. Sq. M. □ Cu. Ft.* Cu. M.*
						-

* Volume (cubic feet/cubic meter) should be used only if unable to measure by linear or square measure (ex: if asbestos has fallen off surfaces).

NOTIFICATION OF INTENT TO RENOVATE OR DEMOLISH (continued)

11.	PROJECT DESCRIPTION	#))		
• • •	a)Renovation: Indicate the surface	es RACM will be removed from	Encapsulation (for MDPH): Indicate s	urfaces to be encapsulated:
	Piping Fittings	Boiler(s) Tank(s)		piler(s) Tank(s)
	Beam(s) Duct(s)	Tunnel(s) Ceiling Tile(s)		innel(s) Ceiling Tile(s)
- 12		runnel(s) centing the(s)		anticity Coming the(s)
	Other: (describe)	- i s	Other: (describe)	
	- 11			110000
, e	hiMethod of removal. Describe t	now the ashestos will be removed fr	om the surface (example: glove bag, scrape	with hand tools cut in
100				
	sections and calendity lower, etc	"Scrape with hand too	ls, cut in sections with har	nd tools and
	carefully lower, wet	wipe and vacuum conta	minated surfaces.	
***	· · · · · · · · · · · · · · · · · · ·			
			the state of the s	
	c)Demolition: Describe method of	demolition and indicate if complete of	or partial demolition (If partial, describe which	part will be demolished.)
	72 × 740	, 최정	* *	
		- Company 2007		
12	ENGINEEDING CONTROLS: Des	cribe work practices and engineering	controls used to prevent visible emissions be	fore during and after
12.			ction with a full negative p	
		wet her loas it conjun	COM WITH A THIS REGALIVE I	oressure
			aterial to prevent visible a	
	<u>place wet material in</u>	leaktight containers	<u>that will remain leaktight u</u>	inti! landIi!led.
. 00000		n		ioush, see friehle
13.			in the event that unexpected RACM is found	
i "	asbestos becomes friable (crumble	ed, pulverized, reduced to powder, e	tc.) and therfore regulated: See Section	on 12 Appropriate
	agencies will be re-r	otified if theamount o	f unexpected asbestos found	is at least
	20% different than pr	reviously reported.		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
14.	PROCEDURE(S) USED TO DETEC	T THE PRESENCE OF ASBESTOS	Indicate how you determined whether or not	asbestos is in the facility. If
	analytical sampling was used, desc	cribe method: A recent buil	ding survey was conducted an	nd all suspect
			light microscopy method, mat	1
		and is considered to b		CLIA-13-033UNEV-
	LO CONTAIN ASDESCOS	and is constacted to b	- INTERIOR	
1				
15.	EMERGENCY RENOVATIONS: Da	ate and hour of the emergency:	8	
15.	EMERGENCY RENOVATIONS: Da		8	
15.	EMERGENCY RENOVATIONS: Do Description of the sudden, unexpe		*	
15.			× × × × × × × × × × × × × × × × × × ×	
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15.	Description of the sudden, unexpe	cted event:	ent damage and/or an unreasonable financial	burden:
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PR 5661 (rev. 12/93)

